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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example:If typing, type COMMITTEE (in full) OR TYPE OR PRINT ₩ over the lines American Hospital Association PAC 325 Seventh Street, NW ADDRESS (number and street) Suite 700 Check if different than previously Washington DC 20004 reported. (ACC) FEC IDENTIFICATION NUMBER **STATE** ZIPCODE 🛋 CITY A IS THIS NEW **AMENDED** C00106146 Χ REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Χ Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) (c) 12-Day Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Runoff (30R) Post -Election General (30G) Special (30S) Report for the: **Termination Report** (TER) in the Election on State of 09 0 1 2008 09 30 2008 through Covering Period I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Ms. Melinda Hatton Type or Print Name of Treasurer Electronically Filed by Ms. Melinda Hatton 10 17 2008 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 12/2004)

FE6AN026

Only

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name American Hospital Association PAC [®] D ^UD 0 9 0 1 2008 0.9 3 0 2008 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 2008 1507360.96 January 1 (b) Cash on Hand at 1306960.74 Begining of Reporting Period 259154.98 1084792.36 (c) Total Receipts (from Line 19) (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 1566115.72 2592153.32 6(a) and 6(c) for Column B) 230389.89 1256427.49 7. Total Disbursements (from Line 31) Cash on Hand at Close of Reporting Period 1335725.83 1335725.83 (subtract Line 7 from Line 6(d)) 9. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D)

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) Page 3

Write or Type Committee Name
American Hospital Association PAC

Report Covering the Period:

From:

D D D

2008

. 0.9 M

^D 3 0

^Y 2008

	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11.	Contributions (other than loans) From: (a) Individuals/Persons Other		
	Than Political Committees (i) Itemized (use Schedule A)	77569.27	414889.44
	(ii) Unitemized	45204.59	235501.00
	(iii) TOTAL (add Lines 11(a)(i) and (ii)	122773.86	650390.44
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	975.00
	11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	122773.86	651365.44
2.	Transfers From Affiliated/Other Party Committees	133900.00	401160.33
3.	All Loans Received	0.00	0.00
	Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
6.	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) Refunds of Contributions Made	0.00	0.00
	to Federal candidates and Other Political Committees	2000.00	28000.00
7.	Other Federal Receipts (Dividends, Interest, etc.)	481.12	4266.59
3.	Transfers from Non-Federal and Levin Funds		
	(a) Non-Federal Account (from Schedule H3)	0.00	0.00
	(b) Levin Funds (from Schedule H5)	0.00	0.00
	(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
9.	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	259154.98	1084792.36
0.	Total Federal Receipts (subtract Line 18(c) from Line 19)	259154.98	1084792.36

23.

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4 **COLUMN A COLUMN B II. DISBURSEMENTS Total This Period** Calendar Year-to-Date 21. Operating Expenditures: (a) Shared Federal/Non-Federal Activity (from Schedule H4) 0.00 0.00 (i) Federal Share..... 0.00 0.00 (ii) Non-Federal Share..... (b) Other Federal Operating 8914.89 102762.41 Expenditures..... (c) Total Operating Expenditures 8914.89 102762.41 (add 21(a)(i), (a)(ii) and (b))............ 22. Transfers to Affiliated/Other Party 0.00 0.00 Committees..... Contributions to Federal Candidates/Committees.....and Other Political Committees..... 221475.00 1062450.00 24. Independent Expenditure 0.00 88000.00 0.00 0.00 0.00 0.00 26. Loan Repayments Made..... 0.00 0.00 27. Loans Made..... 28. Refunds of Contributions To: Individuals/Persons Other 0.00 804.75 Than Political Committees 0.00 0.00 (b) Political Party Committees (c) Other Political Committees 0.00 1560.33 (such as PACs) (d) Total Contribution Refunds 0.00 2365.08 (add Lines 28(a), (b), and (c)) 0.00 850.00 29. Other Disbursements..... 30. Federal Election Activity (2 U.S.C 431(20)) (a) Shared Federal Election Activity (from Schedule H6) 0.00 0.00 (i) Federal Share 0.00 0.00 (ii) "Levin" Share (b) Federal Election Activity Paid Entirely 0.00 0.00 With Federal Funds (c) Total Federal Election Activity (add 0.00 0.00 Lines 30(a)(i), 30(a)(ii) and 30(b)).... 31. Total Disbursements (add Lines 21(c), 22, 230389.89 1256427.49 23, 24, 25, 26, 27, 28(d), 29 and 30(c)).. 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) 230389.89 1256427.49 from Line 31).....

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

	III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33.	Total Contributions (other than loans) from Line 11(d), page 3)	122773.86	651365.44
34.	Total Contribution Refunds (from Line 28(d))	0.00	2365.08
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	122773.86	649000.36
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	8914.89	102762.41
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	8914.89	102762.41

FE6AN026

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 149 (check only one) X 11a 11b 11c 12 13 14 15 16 11
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	atements may not be sold or used by any pe name and address of any political committee	erson for the purpose of soliciting contributions e to solicit contributions from such committee.
∠ \ .	Full Name (Last, First, Middle Initial) Mr. Robert H. Bezanson Mailing Address 4323 East Crosswinds	Place	Date of Receipt
	City Springfield	State Zip Code MO 65809	Transaction ID: 15867650 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	300.00
	Name of Employer CoxHealth Receipt For: Primary General Other (specify) ▼	Occupation President and Chief Executive Office Aggregate Year-to-Date 300.00	cer
- 3.	Full Name (Last, First, Middle Initial) Mr. Bruce Rieker Mailing Address 9618 St. Clement Circl	e	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: 15877008
	Lincoln FEC ID number of contributing federal political committee.	NE 68526-9765	Amount of Each Receipt this Period 350.00
	Name of Employer Nebraska Hospital Association Receipt For: Primary General Other (specify) ▼	Occupation Vice President, Advocacy Aggregate Year-to-Date ▼ 350.00	
_	Full Name (Last, First, Middle Initial) Michael Hansen		Date of Receipt
•	Mailing Address Box 100		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Pender	State Zip Code NE 68047-0100	Transaction ID: 15877010 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	350.00
	Name of Employer Pender Community Hospital	Occupation Chief Executive Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
	SUBTOTAL of Receipts This Page (optional)		1000.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	K)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 149 (check only one) X
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PA	the name and add	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Mr. Earl N Sheehy Mailing Address P O Box 185 City Wahoo	State NE	Zip Code 68066-0185	Date of Receipt M M M / D D J / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer	C	n	350.00
Name of Employer Saunders Medical Center Receipt For: Primary General Other (specify) ▼	Presiden	t and Chief Executive Officer e Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Mr. James P Ulrich, , Jr. Mailing Address 1301 East H Street	; PO Box 1328		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 15877017
McCook FEC ID number of contributing federal political committee.	C	69001	Amount of Each Receipt this Period 350.00
Name of Employer Community Hospital Receipt For:	' ·	n t and Chief Executive Officer e Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	350.00	
Full Name (Last, First, Middle Initial) Mr. Neil Hilton Mailing Address 181 N. Pine Street			Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 15877019
Ainsworth FEC ID number of contributing federal political committee.	C	69210-1538	Amount of Each Receipt this Period 350.00
Name of Employer Brown County Hospital		ecutive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (options	. al)		1050.00
TOTAL This Period (last page this line num	nber only))	

ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one) X 11a
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAG	nd Statements may not be sold or used by any person the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Richard Iseke, , M.D. Mailing Address P O Box 189 City Lawrence	State Zip Code MA 01842-0389	Date of Receipt M M / D D / Y Y Y Y Y 0 9 0 3 2 0 0 8 Transaction ID: 15877022 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer Winchester Hospital	Occupation Vice President Clinical Affairs	250.00
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Jeffrey W Martin Mailing Address 700 South Main Str	eet	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 15877033
Moscow	ID 83843-3056	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Gritman Medical Center	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Ms. Victoria A Alexander		Date of Receipt
Mailing Address P O Box 700		09 02 2008
City	State Zip Code	Transaction ID: 15877034
Salmon FEC ID number of contributing federal political committee.	ID 83467-0700	Amount of Each Receipt this Period 500.00
Name of Employer Steele Memorial Medical Center	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional	ıl) >	1250.00

SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 149 (check only one) X
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any persename and address of any political committee to	on for the purpose of soliciting contributions
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Dr. Gordon L Alexander, , M.D.		Date of Receipt
Mailing Address 2450 Riverside Avenu	е	09 03 7 2008
City	State Zip Code	Transaction ID: 15878028
Minneapolis	MN 55454-1512	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer University of Minnesota Medical Center	Occupation President	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Mr. Jason Carlson	1	Date of Receipt
Mailing Address 1010 South Birch Stre	eet	09 03 7 2008
City	State Zip Code	Transaction ID: 15878031
Hallock	MN 56728-4215	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	122.00
Name of Employer Kittson Memorial Healthca- re Center	Occupation Chief Executive Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	297.00	
Full Name (Last, First, Middle Initial) Mr Mark A Skubic	I	Date of Receipt
Mailing Address 6500 Excelsior Boulev	vard	09 03 YYYYY 09 03
City	State Zip Code	Transaction ID: 15878040
Minneapolis	MN 55426-4702	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Park Nicollet Health Serv- ices	Occupation Vice President Government Relation	s an
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
CURTOTAL of December This Page (ontional)		622.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 149 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) American Hospital Association Page 1	and Statements may not be sold or used by any persong the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Lowell C. Kruse, FACHE Mailing Address 7300 SE 75th Roa City Saint Joseph FEC ID number of contributing federal political committee. Name of Employer Heartland Health Receipt For: Primary General Other (specify)	State Zip Code MO 64507-8073 C Occupation President and Chief Executive Officer Aggregate Year-to-Date	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr. Thomas H Rockers Mailing Address 153 Gay Avenue City Clayton FEC ID number of contributing federal political committee. Name of Employer St. Anthony's Medical Center Receipt For: Primary General Other (specify)	State Zip Code MO 63105-3665 C Occupation President and Chief Executive Officer Aggregate Year-to-Date 211.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr. Charles V. Robb Mailing Address 5461 Northeast N City Lee's Summit FEC ID number of contributing federal political committee. Name of Employer Saint Luke's Health System Receipt For: Primary General Other (specify)	orthgate Crossing State Zip Code MO 64064-1231 C Occupation CEO Aggregate Year-to-Date ▼ 400.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (option	nal)	1611.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 149 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using the	Statements may not be sold or used by any perso e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Robert S. Bonney		Date of Receipt
Mailing Address 11522 Carter Street	Chata 7in Code	0 9 0 8 2 0 0 8 2 0 0 8
City <u>Overland Park</u>	State Zip Code KS 66210-2918	Transaction ID: 15878380 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	400.00
Name of Employer Saint Luke's Health System	Occupation Sr. V.P., Business Development	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
Full Name (Last, First, Middle Initial) Ms. Nancy L. Seelen Mailing Address 200 West Naver Blad	W745	Date of Receipt
Mailing Address 333 West Meyer Blvd	., #/15	09 08 2008
City	State Zip Code	Transaction ID: 15878381
Kansas City	MO 64113-1743	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	400.00
Name of Employer Saint Luke's Health System	Occupation Vice President, Public Affairs	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
Full Name (Last, First, Middle Initial) C. Mr. Roger M. Eitelman		Date of Receipt
Mailing Address 111 Foxhall Road		09 03 2008
City	State Zip Code	Transaction ID: 15879592
Charles Town FEC ID number of contributing federal political committee.	WV 25414-2502	Amount of Each Receipt this Period 300.00
Name of Employer WVU Hospitals - East	Occupation President & CEO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
SUBTOTAL of Receipts This Page (optional) .		1100.00
TOTAL This Period (last page this line number	·	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12 / 149 (check only one) X 11a 11b 11c 12 13 14 15 16 17
(Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements may not be sold or used by any perso name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	American Hospital Association PAC		-
Α.	Full Name (Last, First, Middle Initial) Dr. Glenn Crotty, , Jr., M.D Mailing Address 36E Coventry Road		Date of Receipt
		01-1- 7'- 0-1-	09 03 2008
	City South Charleston	State Zip Code WV 25309	Transaction ID: 15879595 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer Charleston Area Medical Center	Occupation Executive Vice President and Chief O	p ¢
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	
В.	Full Name (Last, First, Middle Initial) Mr. Stephen P Dexter		Date of Receipt
	Mailing Address 7 Stony Point Road		09 03 7 2008
	City Charleston	State Zip Code WV 25314-1663	Transaction ID: 15879596
	FEC ID number of contributing federal political committee.	WV 25314-1663	Amount of Each Receipt this Period 500.00
	Name of Employer Thomas Memorial Hospital	Occupation President and Chief Executive Officer	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	
с. С.	Full Name (Last, First, Middle Initial) Dr. Joseph Endrich, , M.D.		Date of Receipt
	Mailing Address 362 Hudson Hill		09 03 2008
	City	State Zip Code	Transaction ID: 15879597
	Weirton FEC ID number of contributing federal political committee.	WV 26062-5582	Amount of Each Receipt this Period 500.00
	Name of Employer Weirton Medical Center	Occupation President and Chief Executive Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional)		1500.00
	TOTAL This Period (last page this line number	·	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 / 149 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAC	d Statements may not be sold or used by any person the name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr Larry C Hudson Mailing Address 5035 Bennington D	rive State Zip Code	Date of Receipt M
Cross Lanes FEC ID number of contributing federal political committee.	WV 25313-2055	Amount of Each Receipt this Period 500.00
Name of Employer Charleston Area Medical Center Receipt For: Primary General Other (specify) ▼	Occupation Executive Vice President and Chief Fir Aggregate Year-to-Date ▼ 500.00	<u>n</u>
Full Name (Last, First, Middle Initial) Alan N. King Mailing Address 518 Chalagi Lane		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Vienna	State Zip Code WV 26105-8282	Transaction ID: 15879601 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer St. Joseph's Hospital	Occupation CEO]
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Dan Lauffer, , FACHE Mailing Address 1039 Pendleton Pla	ce	Date of Receipt
City	State Zip Code	0 9 0 3 2 0 0 8 Transaction ID: 15879602
Hurricane FEC ID number of contributing	WV 25526-9484	Amount of Each Receipt this Period 500.00
federal political committee. Name of Employer Saint Francis Hospital	Occupation Chief Executive Officer	_
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
CURTOTAL of Descripts This Descriptions	l)	1250.00

City	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 / 149 (check only one) X 11a 11b 11c 12 13 14 15 16 17
American Hospital Association PAC Full Name (Last, First, Middle Initial) Milling Address #4 Story Point Road City Charleston FEC ID number of contributing federal political committee. Name of Employer Charleston First, Middle Initial) Mr. David L Ramsey Mailing Address 20 Wildacre Road City Charleston State City Charleston FEC ID number of contributing federal political committee. City Charleston City Charleston FEC ID number of contributing	or for commercial purposes, other than using the	Statements may not be sold or used by any perso e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Mr. Richard L. Miller Mailing Address #4 Stony Point Road City State Zip Code Transaction ID: 15879615 Charleston WV 25314-1670 FEC ID number of contributing federal political committee. Care Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. David L. Ramsey Mailing Address 20 Wildacre Road City State Zip Code Transaction ID: 15879629 Amount of Each Receipt this Period Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) Mr. David L. Ramsey Mailing Address 20 Wildacre Road City State Zip Code Transaction ID: 15879629 Amount of Each Receipt this Period Date of Receipt Mr. David L. Ramsey Mailing Address 20 Wildacre Road City State Zip Code Transaction ID: 15879629 Amount of Each Receipt this Period President and Chief Executive Officer Receipt In President and Chief Executive Officer Receipt In President and Chief Executive Officer Receipt In President Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) Mr. David J Robertson Mailing Address 2052 Iron Bridge Circle City State Zip Code Morgantown WV 26508-8064 FEC ID number of contributing federal political committee. City State Zip Code Morgantown WV 26508-8064 FEC ID number of contributing federal political committee. City State Zip Code Morgantown WV 26508-8064 FEC ID number of contributing federal political committee. City Aggregate Year-to-Date ▼ President & CEO Aggregate Year-to-Date ▼ Other (specify) ▼ Other (specify) ▼ Aggregate Year-to-Date ▼ Full Ramse (Last, First, Middle Initial) Amount of Each Receipt this Period Amount of Each Receip	· · · · · · · · · · · · · · · · · · ·		-
City State Zip Code WV 25314-1670 FEC ID number of contributing federal political committee. Name of Employer West Virginia Hospital Association Receipt For: Primary General Other (specify) ▼	Mr. Richard L. Miller		'
Charleston WV 25314-1670 FEC ID number of contributing federal political committee. Name of Employer West Virginia Hospital Association Receipt For: Primary General Aggregate Year-to-Date ▼		Olate 7's Oads	09 03 2008
FEC ID number of contributing federal political committee. Name of Employer Occupation West Virginia Hospital Association Receipt For: Other (specify) ▼			
Sociation Vice Fristorint Aggregate Year-to-Date ▼	FEC ID number of contributing		500.00
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. David L Ramsey Mailing Address 20 Wildacre Road City Charleston WV 25314 FEC ID number of contributing federal political committee. Name of Employer Charleston Area Medical Center Receipt For: Primary General Other (specify) ▼ State Zip Code WV 25314 Coccupation President and Chief Executive Officer Aggregate Year-to-Date ▼ Date of Receipt Transaction ID: 15879629 Amount of Each Receipt this Period 500.00 Date of Receipt Transaction ID: 15879629 Amount of Each Receipt this Period 500.00 Date of Receipt Sound Transaction ID: 15879639 Amount of Each Receipt this Period Full Name (Last, First, Middle Initial) Mr. David J Robertson Mailing Address 2052 Iron Bridge Circle City Morgantown FEC ID number of contributing federal political committee. Name of Employer Monorgalia General Hospit- Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Occupation President & CEO Aggregate Year-to-Date ▼ Sound Transaction ID: 15879636 Amount of Each Receipt this Period Aggregate Year-to-Date ▼ Sound Sound Transaction ID: 15879636 Amount of Each Receipt this Period Sound Transaction ID: 15879636 Amount of Each Receipt this Period Sound Sound Aggregate Year-to-Date ▼ Sound			
Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. David L Ramsey Mailing Address 20 Wildacre Road City State Zip Code WV 25314 FEC ID number of contributing federal political committee. Name of Employer Charleston Area Medical Center Receipt For: Primary General Other (specify) ▼ City State Zip Code WV 25314 Amount of Each Receipt this Period Transaction ID: 15879629 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Date of Receipt Transaction ID: 15879629 Amount of Each Receipt this Period Full Name (Last, First, Middle Initial) Mr. David J Robertson Mailing Address 2052 Iron Bridge Circle City State Zip Code Morgantown WV 26508-8064 FEC ID number of contributing federal political committee. C State Zip Code Morgantown FEC ID number of contributing federal political committee. C State Zip Code Transaction ID: 15879636 Amount of Each Receipt this Period Sound Amount of Each Receipt Transaction ID: 15879636 Amount of Each Receipt this Period C State Zip Code Transaction ID: 15879636 Amount of Each Receipt Transaction ID: 15879636 Amount of Each Receipt Transaction ID: 15879636 Amount of Each Receipt Transaction ID: 15879636 C State Zip Code Transaction ID: 15879636 Transaction ID: 15879636 Amount of Each Receipt Transaction ID: 15879636 Amount of Each Receipt Transaction ID: 15879636 Amount of Each Receipt Transaction ID: 15879636 C State Zip Code Transaction ID: 15879636 Transaction ID: 15879636 Amount of Each Receipt Transaction ID: 15879636 Transaction ID: 15879636 Transaction ID: 15879636 Amount of Each Receipt Transaction ID: 15879636 Amount of Each Receipt Transaction ID: 15879636 Transaction ID: 15879636 Amount of Each Receipt Transaction ID: 15879636 Transaction ID: 15879636 Amount of Each Receipt Transaction	Receipt For:	Aggregate Year-to-Date ▼	
Miling Address 20 Wildacre Road City State Zip Code Charleston WV 25314 FEC ID number of contributing federal political committee. Name of Employer Road Other (specify) ▼ Name of Employer Monongalia General President & CEO Name of Employer Monongalia General President & CEO Name of Employer Monongalia General Other (specify) ▼ Occupation President and Chief Executive Officer Aggregate Year-to-Date ▼ Transaction ID: 15879629 Amount of Each Receipt this Period Food. Transaction ID: 15879629 Amount of Each Receipt this Period Food. Date of Receipt Food. Aggregate Year-to-Date ▼ Transaction ID: 15879639 Transaction ID: 15879636 Transaction ID: 15879636 Transaction ID: 15879636 Amount of Each Receipt Monongalia General Hospital President & CEO Aggregate Year-to-Date ▼ State Zip Code Transaction ID: 15879636 Transaction ID: 15879636 Transaction ID: 15879636 Amount of Each Receipt this Period Food. Aggregate Year-to-Date ▼ Stool.00		500.00	
City State Zip Code WV 25314 FEC ID number of contributing federal political committee. Name of Employer Charleston Area Medical Center Receipt For: Primary General Other (specify) ▼ City State Zip Code WV 25314 Amount of Each Receipt this Period Fresident and Chief Executive Officer Aggregate Year-to-Date ▼ Date of Receipt Date of Receipt Date of Receipt Milling Address 2052 Iron Bridge Circle City State Zip Code WV 26508-8064 FEC ID number of contributing federal political committee. Name of Employer Monongalia General Hospital Receipt & CE Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Occupation President & CEO Aggregate Year-to-Date ▼ Stool.00		1	Date of Receipt
Charleston WV 25314 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Name of Employer Charleston Area Medical Center Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. David J Robertson Mailing Address 2052 Iron Bridge Circle City State Zip Code Morgantown FEC ID number of contributing federal political committee. Name of Employer Monongalia General Hospit-al Receipt For: Primary General Other (specify) ▼ Occupation President & CEO Aggregate Year-to-Date ▼ Transaction ID: 15879636 Amount of Each Receipt this Period Transaction ID: 15879636 Amount of Each Receipt this Period Transaction ID: 15879636 Amount of Each Receipt this Period State Zip Code Transaction ID: 15879636 Amount of Each Receipt this Period Transaction ID: 15879636 Amount of Each Receipt this Period Transaction ID: 15879636 Amount of Each Receipt this Period Transaction ID: 15879636 Amount of Each Receipt this Period Transaction ID: 15879636 Amount of Each Receipt this Period Transaction ID: 15879636 Transaction ID: 15879636 Amount of Each Receipt this Period Transaction ID: 15879636 Tran	Mailing Address 20 Wildacre Road		
FEC ID number of contributing federal political committee. Name of Employer Charleston Area Medical Center Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. David J Robertson Mailing Address 2052 Iron Bridge Circle City State Zip Code Morgantown FEC ID number of contributing federal political committee. Name of Employer Monongalia General Hospit-all Receipt For: Primary General Other (specify) ▼ Occupation President and Chief Executive Officer Aggregate Year-to-Date ▼ Tansaction ID: 15879636 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Name of Employer Monongalia General Hospit-all Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Sould Section For Sould Section S	City	·	Transaction ID: 15879629
Name of Employer Charleston Area Medical Center Receipt For: Primary General Other (specify) ▼		WV 25314	Amount of Each Receipt this Period
Charleston Areá Medical Center Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. David J Robertson Mailing Address 2052 Iron Bridge Circle City State Zip Code Morgantown FEC ID number of contributing federal political committee. Name of Employer Monongalia General Hospital Receipt For: Primary General Other (specify) ▼ Occupation President and Chief Executive Officer Aggregate Year-to-Date ▼ Date of Receipt M M M D D D D D D D D D D D D D D D D		C	500.00
Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. David J Robertson Mailing Address 2052 Iron Bridge Circle City State Zip Code Morgantown FEC ID number of contributing federal political committee. Name of Employer Monongalia General Hospital Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Date of Receipt M M M O D D O O O O O O O O O O O O O O	Charleston Áreá Medical		
Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. David J Robertson Mailing Address 2052 Iron Bridge Circle City State Zip Code Morgantown FEC ID number of contributing federal political committee. Name of Employer Monongalia General Hospital Receipt For: Primary General Other (specify) ▼ State Zip Code Transaction ID: 15879636 Amount of Each Receipt this Period Cocupation President & CEO Aggregate Year-to-Date ▼ Stool.00			
Mr. David J Robertson Mailing Address 2052 Iron Bridge Circle City State Zip Code Morgantown WV 26508-8064 FEC ID number of contributing federal political committee. Name of Employer Monongalia General Hospital Receipt For: Primary General Other (specify) ▼ Date of Receipt M M M M O 9 0 3 / Y 2 0 0 8 Transaction ID: 15879636 Amount of Each Receipt this Period 500.00	H ' -	500.00	
City Morgantown FEC ID number of contributing federal political committee. Name of Employer Monongalia General Hospital Receipt For: Primary On 9 0 3 2 0 0 8 Transaction ID: 15879636 Amount of Each Receipt this Period Cocupation President & CEO Aggregate Year-to-Date ▼ 500.00			Date of Receipt
Morgantown FEC ID number of contributing federal political committee. Name of Employer Monongalia General Hospital Receipt For: Primary General Other (specify) ▼ Amount of Each Receipt this Period C Soundation President & CEO Aggregate Year-to-Date ▼ Soundation President S	Mailing Address 2052 Iron Bridge Circ	Mailing Address 2052 Iron Bridge Circle	
FEC ID number of contributing federal political committee. Name of Employer Monongalia General Hospital President & CEO Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00	•	•	Transaction ID: 15879636
federal political committee. Name of Employer Monongalia General Hospital President & CEO Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		WV 26508-8064	Amount of Each Receipt this Period
Al President & CEO Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00	federal political committee.	C	500.00
Primary General Other (specify) ▼ 500.00	<u>al</u>	President & CEO	
Other (specify) ▼ 500.00			
		500.00	
SUBTOTAL of Receipts This Page (optional)	SUBTOTAL of Receipts This Page (optional) .		1500.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 15 / 149 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Ar	for commercial purposes, other than using the	Statements may not be sold or used by any person e name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Mr Robert D Whitler		Date of Receipt
	Mailing Address 5 Evergreen Drive		09 03 2008
	City Elkview	State Zip Code WV 25071-9314	Transaction ID: 15879643 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C 2507 1 0014	500.00
	Name of Employer Charleston Area Medical Center	Occupation Vice President Government and Com	nmunit
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	500.00	
_	Full Name (Last, First, Middle Initial) Mr. Edward J Bonn		Date of Receipt
	Mailing Address 11 Upper Riverdale R	oad SW	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City	State Zip Code	Transaction ID: 15880167
	Riverdale	GA 30274-2600	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Southern Regional Medical	Occupation President and Chief Executive Officer	r
	Center Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	250.00	
	Full Name (Last, First, Middle Initial) Ms Mary Kay Gardenier		Date of Receipt
	Mailing Address 11 Upper Riverdale R	oad SW	M M / D D / Y Y Y Y Y O D D / Y D D D / Y D D D D D D D D D D D
	City	State Zip Code	Transaction ID: 15880171
	Riverdale FEC ID number of contributing	GA 30274-2615	Amount of Each Receipt this Period
	federal political committee.	C	250.00
	Name of Employer Southern Regional Medical Center	Occupation Senior Vice President Operations and	d C
	Receipt For: Primary General	Aggregate Year-to-Date ▼	1
	Other (specify) ▼	250.00	
Г			1000.00

If from such Reports and State loses, other than using the natural state of the second state of the secon	State Zip Coc GA 30067 C Occupation Director of Grassror Aggregate Year-to-Dat	de ots and Advocacy	Date of Receipt
tal Association PAC rst, Middle Initial) 1675 Terrell Mill Road contributing mittee. ssociat- General y) rst, Middle Initial) gh, , FACHE	GA 30067 C C C C C C C C C C C C C C C C C C C	ots and Advocacy	Transaction ID: 15880175 Amount of Each Receipt this Period 200.00
contributing mittee. ssociat- General y) rst, Middle Initial) gh, , FACHE	GA 30067 C C C C C C C C C C C C C C C C C C C	ots and Advocacy	Transaction ID: 15880175 Amount of Each Receipt this Period 200.00
contributing nmittee. ssociat- General y) rst, Middle Initial) gh, , FACHE	GA 30067 C C C C C C C C C C C C C C C C C C C	ots and Advocacy	Transaction ID: 15880175 Amount of Each Receipt this Period 200.00 Date of Receipt
mmittee. ssociat- General y) ▼ rst, Middle Initial) gh, , FACHE	GA 30067 C C C C C C C C C C C C C C C C C C C	ots and Advocacy	Amount of Each Receipt this Period 200.00 Date of Receipt
mmittee. ssociat- General y) ▼ rst, Middle Initial) gh, , FACHE	Occupation Director of Grassron Aggregate Year-to-Dat	e V	Date of Receipt
mmittee. ssociat- General y) ▼ rst, Middle Initial) gh, , FACHE	Occupation Director of Grassroo Aggregate Year-to-Dat	e V	Date of Receipt
General y) ▼ rst, Middle Initial) gh, , FACHE	Director of Grassroo Aggregate Year-to-Dat State Zip Coo	e V	M M / D D / Y Y Y Y
General y) ▼ rst, Middle Initial) gh, , FACHE	Aggregate Year-to-Dat	e V	M M / D D / Y Y Y Y
y) ▼ rst, Middle Initial) gh, , FACHE	State Zip Coo		M M / D D / Y Y Y Y
y) ▼ rst, Middle Initial) gh, , FACHE	·	637.50	M M / D D / Y Y Y Y
gh, , FACHE	·		M M / D D / Y Y Y Y
•	·		M M / D D / Y Y Y Y
	·		U \rightarrow U \rightarrow U \right
	·	le	Transaction ID: 15880181
	GA 30529-	1078	Amount of Each Receipt this Period
contributing nmittee.	C		250.00
er	Occupation Chief Executive Off	cer	-
General y) ▼	Aggregate Year-to-Dat	250.00	
rst, Middle Initial) I.D.			Date of Receipt
3103 Tam O'Shanter			09 03 2008
	State Zip Coo	le	Transaction ID: 15880191
	KS 67601-	8100	Amount of Each Receipt this Period
contributing nmittee.	C		375.00
er	Occupation President and Chief	Executive Officer	
	Aggregate Year-to-Dat	e ▼ 375.00	
1	mittee. er General	contributing mittee. C Occupation President and Chief Aggregate Year-to-Date	Occupation President and Chief Executive Officer Aggregate Year-to-Date General

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 17 / 149 (check only one) X 11a 11b 11c 12
Any information copied from such Reports an	d Statements may not be sold or used by any perso the name and address of any political committee to	n for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American Hospital Association PAC		Solicit Contributions from Such Continues.
Full Name (Last, First, Middle Initial) Mr. Robert K. Page		Date of Receipt
Mailing Address 12610 W. 71st. St.		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 15880217
Shawnee	KS 66216-2635	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer University of Kansas Hosp- ital	Occupation Chief Executive Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Mrs. Janet Stanek		Date of Receipt
Mailing Address 6755 SW Dancaste	r Road	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 15880223
Topeka	KS 66610-1412	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Stormont-Vail HealthCare	Occupation Sr. Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Glenn A Fosdick, , FACHE		Date of Receipt
Mailing Address 987400 Nebraska N	Medical Center	09 09 2008
City	State Zip Code	Transaction ID: 15882001
<u>Omaha</u>	NE 68198-7400	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Nebraska Medical Center	Occupation President and Chief Executive Officer	r
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
	1	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 18 / 149 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements ma name and ad	y not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
	American Hospital Association PAC			
Α.	Full Name (Last, First, Middle Initial) Mr. Dennis E Klima Mailing Address 640 South State Street	•		Date of Receipt
				09 10 2008
	City Dover	State DE	Zip Code 19901-3597	Transaction ID: 15882012 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	10001 0007	750.00
	Name of Employer Bayhealth Medical Center	Occupation Presiden	on It and Chief Executive Office	 r
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 750.00	
- В.	Full Name (Last, First, Middle Initial) Ms Terry Murphy Mailing Address CAS County Charles Charles	<u> </u>		Date of Receipt
	Mailing Address 640 South State Street	[09 10 2008
	City	State	Zip Code	Transaction ID: 15882013
	Dover FEC ID number of contributing federal political committee.	C	19901-3597	Amount of Each Receipt this Period 250.00
	Name of Employer Bayhealth Medical Center	Occupation Executiv	_n e Vice President and Chief C)pe
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00]
с. С.	Full Name (Last, First, Middle Initial) Ms. Deborah L. Watson			Date of Receipt
	Mailing Address 77 Brynberry Court			09 10 2008
	City	State	Zip Code	Transaction ID: 15882014
	Magnolia FEC ID number of contributing federal political committee.	DE C	19962-1596	Amount of Each Receipt this Period 250.00
	Name of Employer Bayhealth Medical Center	Occupation Vice Pre-		
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 250.00	
	SUBTOTAL of Receipts This Page (optional)	ı		1250.00
f	TOTAL This Period (last page this line number	only)		

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 19 / 149 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PA	and Statements may not be sold or used by any person g the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mrs. Bonnie Perratto Mailing Address 6 Derbyshire Ct. City Dover FEC ID number of contributing federal political committee. Name of Employer Bayhealth Medical Center Receipt For: Primary General	State Zip Code DE 19904-5746 C Occupation Sr.VP/Chief Nurse Executive Aggregate Year-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr. Timothy M. Callaghan Mailing Address 14006 West 73rd S City Shawnee FEC ID number of contributing federal political committee.		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer Saint Luke's Health System Receipt For: Primary General Other (specify) ▼	Occupation Chief Executive Officer Aggregate Year-to-Date 300.00	
Full Name (Last, First, Middle Initial) Mr. Don L. Sipes Mailing Address 8704 Northwest 85		Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Kansas City FEC ID number of contributing federal political committee.	State Zip Code MO 64153-2356 C	Transaction ID: 15882028 Amount of Each Receipt this Period 400.00
Name of Employer Saint Luke's Northland Ho- spital-Smithv Receipt For: Primary General Other (specify) ▼	Occupation Chief Executive Officer Aggregate Year-to-Date ▼ 400.00	
SUBTOTAL of Receipts This Page (option	al)	950.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 20 / 149 (check only one) X 11a
,	or for commercial purposes, other than using the	Statements may not be sold or used by any perse name and address of any political committee t	oon for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Α.	Full Name (Last, First, Middle Initial) Vincent C. Caponi		Date of Receipt
	Mailing Address 8166 Darnley Court	01-1- 7'- 0-1-	09 08 2008
	City Indianapolis	State Zip Code IN 46260-2906	Transaction ID: 15882728 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer St. Vincent Health	Occupation Hospital CEO	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
В.	Full Name (Last, First, Middle Initial) Mr. Dennis W Dawes, , FACHE Mailing Address 1000 E. Main St.		Date of Receipt
			09 08 2008
	City Danville	State Zip Code IN 46122-1948	Transaction ID: 15882732 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer Hendricks Regional Health	Occupation Hospital President	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
_ С.	Full Name (Last, First, Middle Initial) Mr. David R Doerr	1	Date of Receipt
	Mailing Address 11200 S. State Rd. 63	3	09 08 7 2008
	City	State Zip Code IN 47802	Transaction ID: 15882733
	Terre Haute FEC ID number of contributing federal political committee.	IN 47802	Amount of Each Receipt this Period 500.00
	Name of Employer Union Hospital	Occupation Hospital CEO	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional) .		1500.00
t	TOTAL This Period (last page this line number		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21 / 149 (check only one) X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements may not be sold or used by any person name and address of any political committee to s	for the purpose of soliciting contributions olicit contributions from such committee.
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Scott R Graybill		Date of Receipt
Mailing Address 268 Meadowlark Lane		09 08 YYYY 2008
City	State Zip Code	Transaction ID: 15882737
Bremen	IN 46506-1846	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Community Hospital of Bre-	Occupation President and Chief Executive Officer]
men Receipt For:	Aggregate Year-to-Date ▼	1
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Ms. Katherine Humphreys	<u> </u>	Date of Receipt
Mailing Address PO Box 935		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 15882741
South Bend	IN 46624-0935	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer St. Vincent Health	Occupation Hospital Senior VP	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Ray V Ingham, , Ph.D.		Date of Receipt
Mailing Address 217 East Drive		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 15882742
Lebanon	IN 46052-1221	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Witham Memorial Hospital	Occupation Hospital President and CEO	1
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)	>	1250.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	f	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 22 / 149 (check only one) X 11a 11b 11c 12 13 14 15 16 [
Any information copied from such Reports and Stror for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	atements may no name and addres	t be sold or used by any perso s of any political committee to	
American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Mr. Greg W Lintjer			Date of Receipt
Mailing Address 53308 Monticola Ln.			09 08 2008
City	State	Zip Code	Transaction ID: 15882747
Bristol	IN	46507-9692	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		500.00
Name of Employer Elkhart General Hospital	Occupation Hospital Pre	esident	
Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ar-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Gary A Meyer			Date of Receipt
Mailing Address 2280 Locust Court East	t		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 15882748
Seymour	IN	47274-8672	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Schneck Medical Center	Occupation President ar	nd Chief Executive Office	,
Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ar-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr Tom Van Osdol			Date of Receipt
Mailing Address 2015 Jackson Street			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 15882951
Anderson	IN	46016-4339	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Saint John's Health System	Occupation President		7
Receipt For: Primary General Other (specify)	Aggregate Ye	ar-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)			1000.00

	HEDULE A (FEC Form 3X) MIZED RECEIPTS	Use separate scho for each category Detailed Summary	of the
or fo	or commercial purposes, other than using the NAME OF COMMITTEE (In Full)	atements may not be sold or used I name and address of any political o	by any person for the purpose of soliciting contributions ommittee to solicit contributions from such committee.
	American Hospital Association PAC		
	ull Name (Last, First, Middle Initial) Is. Linda E White		Date of Receipt
N -	Mailing Address 5505 Timberlake Cour		09 / 08 / 2008
	Dity	State Zip Code	Transaction ID: 15882952
F	Evansville EC ID number of contributing ederal political committee.	IN 47710-4134	Amount of Each Receipt this Period 500.00
<u> </u>	lame of Employer Deaconess Hospital	Occupation Hospital CEO	
F	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼	500.00
N	Full Name (Last, First, Middle Initial) Mr. Stephen M Erixon		Date of Receipt
IN	Mailing Address 220 Windy Ridge		09 09 2008
	City	State Zip Code	Transaction ID: 15883142
F	Hollister EC ID number of contributing ederal political committee.	MO 65672-5725	Amount of Each Receipt this Period 42.00
٤	lame of Employer skaggs Community Health Center	Occupation Chief Executive Officer	
F	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	36.00
	Full Name (Last, First, Middle Initial) Mr. Thomas G Bartlett, III, M.D.		Date of Receipt
N	Mailing Address 25117 Highway 15		09 / DD / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Dity	State Zip Code	Transaction ID: 15883386
F	Union FEC ID number of contributing ederal political committee.	MS 39365-9088	Amount of Each Receipt this Period 250.00
I L	lame of Employer aird Hospital	Occupation Administrator	
F	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	50.00
SIII	BTOTAL of Receipts This Page (optional)		792.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 24 / 149 (check only one) X
Any information copied from such Reports at or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAG	nd Statements may not be sold or used by any person the name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Sam W. Cameron Mailing Address 28 Waterford Place		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City <u>Jackson</u>	State Zip Code MS 39211-2945	Transaction ID: 15883395 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	77.50
Name of Employer Mississippi Hospital Association Receipt For: Primary General Other (specify) ▼	Occupation President & Chief Executive Officer Aggregate Year-to-Date 585.00	
Full Name (Last, First, Middle Initial) Mr. Charles L Denton Mailing Address 960 Avent Drive	-	Date of Receipt
City	State Zip Code	09 09 2008
Grenada	MS 38901-5230	Transaction ID: 15883401 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer Grenada Lake Medical Cent- er	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Mr. David Putt	-	Date of Receipt
Mailing Address 2500 North State S		09 / 09 / 2008
City <u>Jackson</u>	State Zip Code MS 39216-4500	Transaction ID: 15884190 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer University Hospitals and Clinics, Univ	Occupation CEO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUPTOTAL of Possints This Page (ontions	J)	627.50

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 25 / 149 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any person name and address of any political committee to s	for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Ms. Marcella McKay		Date of Receipt
Mailing Address 322 Helmsley Drive	State Zin Code	09 09 2008
City Brandon	State Zip Code MS 39047-8159	Transaction ID: 15884199 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10.00
Name of Employer Mississippi Hospital Asso- ciation Receipt For:	Occupation President & CEO, MHA Health Founda Aggregate Year-to-Date ▼	ation
Primary General Other (specify) ▼	262.50	
Full Name (Last, First, Middle Initial) Mr. Gerald D Wages		Date of Receipt
Mailing Address 830 S. Gloster Street		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 15884204
Tupelo	MS 38801-4996	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	875.00
Name of Employer North Mississippi Health Services, Inc	Occupation Interim President and Chief Executive	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 875.00	
Full Name (Last, First, Middle Initial) Mr. G. Douglas Higginbotham		Date of Receipt
Mailing Address P O Box 607		09 09 2008
City	State Zip Code	Transaction ID: 15884206
Laurel	MS 39441-0607	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	275.00
Name of Employer South Central Regional Me- dical Center	Occupation Executive Director	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	275.00	
SUBTOTAL of Receipts This Page (optional)		1160.00
TOTAL This Period (last page this line number		

	HEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 26 / 149 (check only one) X
or for	nformation copied from such Reports and St commercial purposes, other than using the AME OF COMMITTEE (In Full) merican Hospital Association PAC	tatements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
M M	ull Name (Last, First, Middle Initial) ir. W. Kent Rogers lailing Address 835 Medical Center Dri	ve	Zip Code	Date of Receipt M M
<u>V</u> FI	Vest Point EC ID number of contributing deral political committee.	MS C	39773-9320	Amount of Each Receipt this Period 300.00
<u>C</u>	ame of Employer orth Mississippi Medical enter-West eceipt For: Primary General Other (specify) ▼		ecutive Officer e Year-to-Date 300.00	
. <u>M</u>	ull Name (Last, First, Middle Initial) Ir. Davis A Richards, III ailing Address 1050 River Oaks Drive			Date of Receipt 0 9 0 9 2 0 0 8
C	ity	State	Zip Code	Transaction ID: 15884217
_	lowood	MS	39232	Amount of Each Receipt this Period
fe	EC ID number of contributing deral political committee.	C		250.00
N R	ame of Employer iver Oaks Hospital	Occupatio Presiden	ⁿ t and Chief Executive Office	r
R	eceipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
	ull Name (Last, First, Middle Initial) Ir. Jimmy Graves			Date of Receipt
М	ailing Address 100 Hospital Drive			09 09 2008
	ity	State	Zip Code	Transaction ID: 15884218
FI	ylertown EC ID number of contributing orderal political committee.	MS C	39667-2099	Amount of Each Receipt this Period 250.00
N W H	ame of Employer /althall County General ospital	Occupatio Administ		
R	eceipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00]
SUE	BTOTAL of Receipts This Page (optional)			800.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Χ)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 27/149 (check only one)
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may	y not be sold or used by any person	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American Hospital Association PAG		areas or any political committee to	Solicit Contributions from Such Committee.
Full Name (Last, First, Middle Initial) Mr. Andrew Mayo			Date of Receipt
Mailing Address 5241 Boswell Road			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Memphis	State TN	Zip Code 38120-1511	Transaction ID: 15884220 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Parkwood Behavioral Health System	Occupation Chief Exe	n ecutive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. C. Gerald Cotton			Date of Receipt
Mailing Address 1225 N. State Stree	et		09 09 2008
City Jackson	State MS	Zip Code 39202-2064	Transaction ID: 15884221 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Mississippi Baptist Medic- al Center	Occupation President		
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Hank Wheeler			Date of Receipt
Mailing Address 133 Poinsetta Looo	pp		09 09 2008
City	State MS	Zip Code	Transaction ID: 15884222
Pass Christian FEC ID number of contributing federal political committee.	C	39571-2421	Amount of Each Receipt this Period 250.00
Name of Employer Hancock Medical Center	Occupation Facilities	n Services Director	
Receipt For: Primary General Other (specify) ▼	 	e Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional	1)		1250.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 28 / 149 (check only one) X
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAG	the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Mr Louis J Woolf Mailing Address 81 Highland Avenue	e		Date of Receipt
City Salem FEC ID number of contributing	State MA	Zip Code 01970-2714	0 9 1 1 2 0 0 8 Transaction ID: 15885273 Amount of Each Receipt this Period 250.00
Name of Employer North Shore Medical Center Receipt For: Primary General Other (specify)	Occupatio Executive	n e Vice President and Chief C e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr Gary Lapidas Mailing Address 1 Biotech Park			Date of Receipt 0 9 1 2 2 0 0 8
City Worcester FEC ID number of contributing federal political committee.	State MA	Zip Code 01605-2982	Transaction ID: 15885276 Amount of Each Receipt this Period 350.00
Name of Employer UMass Memorial Health Care, Inc. Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		n ice President e Year-to-Date ▼ 350.00]
Full Name (Last, First, Middle Initial) Mr. Don Adams Mailing Address 419 Natural Resour	rces Drive		Date of Receipt
City Little Rock FEC ID number of contributing federal political committee.	State AR	Zip Code 72205-1576	Transaction ID: 15897003 Amount of Each Receipt this Period 325.00
Name of Employer Arkansas Hospital Association Receipt For: Primary General Other (specify)	Occupatio Vice Pres		1
SUBTOTAL of Receipts This Page (optional	J)		925.00

	FEMIZED RECEIPTS	Use separate schedu for each category of Detailed Summary P	the (criccit drilly drie)
0	Any information copied from such Reports and S or for commercial purposes, other than using the	atements may not be sold or used by name and address of any political com	any person for the purpose of soliciting contributions nmittee to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
۷.	Full Name (Last, First, Middle Initial) Mr. Jerry Alexander		Date of Receipt
	Mailing Address 153 East Monte Painte	[*] Drive	09 / 16 / Y Y Y Y
	City <u>Fayette</u> ville	State Zip Code AR 72703-4002	Transaction ID: 15897005
	FEC ID number of contributing federal political committee.	AR 72703-4002	Amount of Each Receipt this Period 227.50
	Name of Employer HEALTHSOUTH Rehabilitation Hospital	Occupation Chief Executive Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	7.50
. –	Full Name (Last, First, Middle Initial) Mr. Robert P Atkinson, , FACHE Mailing Address 1600 West 40th Avenu		Date of Receipt
	Mailing Address 1600 West 40th Avenu	e 	09 16 2008
	City Pine Bluff	State Zip Code AR 71603-7089	Transaction ID: 15897006
	FEC ID number of contributing federal political committee.	C 71003-7069	Amount of Each Receipt this Period 227.50
	Name of Employer Jefferson Regional Medical Center	Occupation President and Chief Executive	e Officer
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	7.50
_	Full Name (Last, First, Middle Initial) Mr. David Cicero		Date of Receipt
	Mailing Address P O Box 797		09 16 2008
	City	State Zip Code	Transaction ID: 15897281
	Camden FEC ID number of contributing federal political committee.	AR 71701-0797	Amount of Each Receipt this Period 325.00
	Name of Employer Ouachita Medical Center	Occupation President	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼	5.00
	SUBTOTAL of Receipts This Page (optional)		780.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 30 / 149 (check only one) X
Any information copied from such Reports a or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) American Hospital Association PA	and Statements may not be sold or used by any persor go the name and address of any political committee to s	for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Ms. Tina Creel Mailing Address 419 Natural Resou	urces Drive	Date of Receipt 0 9 1 6 2 0 0 8
City <u>Little Rock</u> FEC ID number of contributing	State Zip Code AR 72205-1576	Transaction ID: 15897282 Amount of Each Receipt this Period
federal political committee. Name of Employer Arkansas Hospital Association Receipt For: Primary General Other (specify) ▼	Occupation Vice President Aggregate Year-to-Date ▼ 325.00	325.00
Full Name (Last, First, Middle Initial) Mr. Paul Cunningham Mailing Address 419 Natural Resou	urces Drive	Date of Receipt 0 9 1 6 2 0 0 8
City	State Zip Code	Transaction ID: 15897284
Little Rock	AR 72205-1576	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	325.00
Name of Employer Arkansas Hospital Associa- tion	Occupation Senior Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	
Full Name (Last, First, Middle Initial) Mr. Harrison M Dean, , FACHE	-	Date of Receipt
Mailing Address 3333 Springhill Dr	ive	09 / 16 / Y Y Y Y Y
City North Little Rock	State Zip Code AR 72117-2922	Transaction ID: 15897285 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	227.50
Name of Employer Baptist Health Medical Ce- nter - North Receipt For:	Occupation Senior Vice President and Administrat	<u>q</u>
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 227.50	
	•	877.50

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 31 / 149 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any persor name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Bob Grant		Date of Receipt
Mailing Address 2302 College Avenue		09 16 7 2008
Caputat	State Zip Code	Transaction ID: 15897681
Conway FEC ID number of contributing federal political committee.	AR 72032-6297	Amount of Each Receipt this Period 325.00
Name of Employer Conway Regional Medical	Occupation Board Member	
Center Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	
Full Name (Last, First, Middle Initial) Mr. Russell D Harrington, , Jr., FAC		Date of Receipt
Mailing Address 9601 Interstate 630, E.	xit 7	09 16 7 2008
City	State Zip Code	Transaction ID: 15897682
Little Rock	AR 72205-7202	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	325.00
Name of Employer Baptist Health	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	
Full Name (Last, First, Middle Initial) Mr. Timothy E Hill		Date of Receipt
Mailing Address 620 N. Willow		09 16 2008
City	State Zip Code	Transaction ID: 15897683
<u>Harrison</u>	AR 72601-2994	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	325.00
Name of Employer North Arkansas Regional Medical Center	Occupation President and Chief Executive Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	325.00	
SUBTOTAL of Receipts This Page (optional)		975.00
TOTAL This Period (last page this line number		

ITEMIZED REC	FEC Form 3X) EIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 32 / 149 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied for for commercial purpose NAME OF COMMIT	ses, other than using the na	ements may ame and add	not be sold or used by any pers ress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
1 \	I Association PAC			
Full Name (Last, Firs Ms. Beth Ingram Mailing Address A	<u> </u>	*		Date of Receipt
0 1	kansas Hospital Assoc 9 Natural Resources D	rive		09 16 2008
City		State	Zip Code	Transaction ID: 15898657
Little Rock		AR	72205	Amount of Each Receipt this Period
FEC ID number of co federal political comm		С		325.00
Name of Employer Arkansas Hospital A tion	ssocia-	Occupation Vice Pres		
Receipt For:	Conord	Aggregate	Year-to-Date ▼	
Other (specify)	General ▼		325.00	
Full Name (Last, Firs	FACHE			Date of Receipt
Mailing Address 20	319 Hwy. 110 West			09 16 7 2008
City		State	Zip Code	Transaction ID: 15898658
Heber Springs		AR	72543-3442	Amount of Each Receipt this Period
FEC ID number of co federal political comn		C		227.50
Name of Employer Baptist Health Medic nter-Heber Sp	al Ce-	Occupation Vice Pres	ident	
Receipt For: Primary	General	Aggregate	Year-to-Date ▼	-
Other (specify)			227.50	
Full Name (Last, Firs	t, Middle Initial)			Date of Receipt
Mailing Address 4	301 West Markham			09 16 2008
City		State	Zip Code	Transaction ID: 15898660
Little Rock		AR	72205-7101	Amount of Each Receipt this Period
FEC ID number of confederal political comm		C		227.50
Name of Employer UAMS Medical Cent	er	Occupation Associate	Director	
Receipt For: Primary	General	Aggregate	Year-to-Date ▼	_
Other (specify)			227.50	
SUBTOTAL of Receipt				780.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 33 / 149 (check only one) X 11a 11b 11c 12 13 14 15 16 11
or for commercial purposes, other than using the	Statements may not be sold or used by any person e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Luther J Lewis, , FACHE		Date of Receipt
Mailing Address P O Box 1998 City	State Zip Code	0 9 1 6 2 0 0 8 Transaction ID: 15898661
El Dorado	AR 71731-1998	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	325.00
Name of Employer Medical Center of South Arkansas	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	
Full Name (Last, First, Middle Initial) Mr. Phil E. Matthews		Date of Receipt
Mailing Address 419 Natural Resource		09 16 YYYYY 2008
City	State Zip Code	Transaction ID: 15899584
Little Rock	AR 72205-1576	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	650.00
Name of Employer Arkansas Hospital Associa- tion	Occupation President & CEO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	
Full Name (Last, First, Middle Initial) Mr. Mike McCoy		Date of Receipt
Mailing Address 1808 West Main Stre	et	09 16 7 2008
City	State Zip Code	Transaction ID: 15899585
Russellville	AR 72801-2724	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	227.50
Name of Employer Saint Mary's Regional Med- ical Center	Occupation Chief Executive Officer	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	227.50	
SUBTOTAL of Receipts This Page (optional)		1202.50
TOTAL This Period (last page this line number	<u> </u>	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 34 / 149 (check only one) X
	Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may name and add	r not be sold or used by any persidress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	Full Name (Last, First, Middle Initial) Mr. Harold E Mitchell, , Jr. Mailing Address 404 South Bradley Stre	eet		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Warren	State AR	Zip Code 71671-3493	Transaction ID: 15899587 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	71071 0430	227.50
	Name of Employer Bradley County Medical Center Receipt For: ☐ Primary ☐ General Other (specify) ▼		rator and Chief Executive O Year-to-Date 227.50	ffi]
3.	Full Name (Last, First, Middle Initial) Mr. Raymond W Montgomery, II, FACHE Mailing Address 3214 East Race Avenu	ie		Date of Receipt 0 9 1 6 2 0 0 8
	City	State	Zip Code	Transaction ID: 15899588
	Searcy FEC ID number of contributing federal political committee.	AR	72143-4810	Amount of Each Receipt this Period 325.00
	Name of Employer White County Medical Cent-	Occupation President	n t and Chief Executive Office	
	er Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 325.00	
_	Full Name (Last, First, Middle Initial) Robert L Morse			Date of Receipt
-	Mailing Address 1100 East Poplar Stree	et		09 16 2008
	City Clarksville	State AR	Zip Code 72830-4419	Transaction ID: 15899589 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		227.50
	Name of Employer Johnson Regional Medical Center	Occupation Administr		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 227.50	
	SUBTOTAL of Receipts This Page (optional)	I		780.00

SCHEDULE A (F	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 35 / 149 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied fro or for commercial purpose NAME OF COMMITTE American Hospital	s, other than using the name and EE (In Full)	may not be sold or used by any person d address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Ms. Kristy Noble Mailing Address 214 City Berryville FEC ID number of confederal political commit Name of Employer St. John's Hospital-Belyille Receipt For: Primary Other (specify)	Carter Street State AR tributing tee. C rry- Assis Aggre General	72616-4303	Date of Receipt M M M D D D 2008 Transaction ID: 15900201 Amount of Each Receipt this Period 227.50
Full Name (Last, First, Mr. Ben E. Owens, , FAC Mailing Address Pos City Jonesboro FEC ID number of confederal political commit Name of Employer St. Bernards Medical Cer Receipt For:	Middle Initial) CHE St Office Box 9320 State AR tributing tee. Cent- Occup Presi	72403-9320 pation dent & Chief Executive Officer egate Year-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Danville FEC ID number of confederal political commit Name of Employer Chambers Memorial H Receipt For: Primary	Middle Initial) hway 10 at Detroit State AR tributing tee. Occup Presi General	72833 Doation dent Degate Year-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Other (specify) SUBTOTAL of Receipts	This Page (optional)	325.00	780.00

SCHEDULE A	(FEC Form 3X) CEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 36 / 149 (check only one) X
Any information copie or for commercial pur	ed from such Reports and St poses, other than using the	tatements may name and add	not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMM American Hosp	MITTEE (In Full) oital Association PAC			
Full Name (Last, I Mr. Ron Peterson	First, Middle Initial)			Date of Receipt
Mailing Address	624 Hospital Drive			09 16 2008
City		State	Zip Code	Transaction ID: 15900205
<u>Mountain Hom</u>	<u>e</u>	AR	72653-2955	Amount of Each Receipt this Period
FEC ID number of federal political co		C		325.00
Name of Employe Baxter Regional N Center	r Medical	Occupation President	n t and Chief Executive Office	r
Receipt For:		Aggregate	Year-to-Date ▼	
Primary Other (spec	General ify) ▼	0 0	325.00	
Full Name (Last, I Mr. Barry Pipkin	First, Middle Initial)			Date of Receipt
Mailing Address	21 Bridgeway Road			09 16 7 2008
City		State	Zip Code	Transaction ID: 15900206
North Little Ro	ck	AR	72113-9516	Amount of Each Receipt this Period
FEC ID number of federal political co		C		227.50
Name of Employe Universal Health ! Inc	r Services	Occupation Chief Exe	n ecutive Officer and Managin	g P
Receipt For:		Aggregate	Year-to-Date ▼	
Other (spec	☐ General ify) ▼		227.50	
Full Name (Last, I Mr. Herbert K Rear	First, Middle Initial) ney, III, FACHE			Date of Receipt
Mailing Address	P O Box 206			09 16 YYYYY 16 2008
City		State	Zip Code	Transaction ID: 15914963
<u>Magnolia</u>		AR	72031-0206	Amount of Each Receipt this Period
FEC ID number o federal political co		C		227.50
Name of Employe Ozark Health Med er	r lical Cent-	Occupation Chief Exe	n ecutive Officer and Administ	ra
Receipt For:		Aggregate	Year-to-Date ▼	
Other (spec	General ify) ▼		227.50]
SUBTOTAL of Rec				780.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 37 / 149 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PA	nd Statements may not be sold or used by any persong the name and address of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Ronald K Rooney, , FACHE Mailing Address P O Box 339 City	State Zip Code	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
Paragould FEC ID number of contributing federal political committee.	AR 72451-0339	Amount of Each Receipt this Period 325.00
Name of Employer Arkansas Methodist Medical Center Receipt For: Primary General Other (specify) ▼	Occupation President Aggregate Year-to-Date 325.00	
Full Name (Last, First, Middle Initial) Mr. Bo Ryall Mailing Address 419 Natural Resou	rces Drive	Date of Receipt 0 9 1 6 2 0 0 8
City	State Zip Code	Transaction ID: 15914965
Little Rock	AR 72205-1576	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	650.00
Name of Employer Arkansas Hospital Associa- tion	Occupation Executive Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	
Full Name (Last, First, Middle Initial) Nathan Anspach		Date of Receipt
Mailing Address 1511 Algardi Avenu	ue	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Coral Gables	State Zip Code FL 33146-1003	Transaction ID: 15914990
FEC ID number of contributing federal political committee.	C 33146-1003	Amount of Each Receipt this Period 250.00
Name of Employer Jackson Health System	Occupation Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUPTOTAL of Possints This Boss (antice	al)	1225.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 38 / 149 (check only one) X 11a 11b 11c 12 15 16 17
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any persor ename and address of any political committee to s	for the purpose of soliciting contributions solicit contributions from such committee.
American Hospital Association PAC Full Name (Last, First, Middle Initial) Mr Frank Barrett		Date of Receipt
Mailing Address 1611 NW 12th Avenue		09 16 2008
City <u>Miami</u>	State Zip Code FL 33136-1005	Transaction ID: 15914992 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Jackson Health System	Occupation Executive Vice President Corporate Af	f
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Paul Belcher Mailing Address Rt. 15, Box 241		Date of Receipt
City	State Zip Code	0 9 1 6 2 0 0 8 Transaction ID: 15914999
Tallahassee	FL 32311	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Florida Hospital Associat- ion	Occupation Senior Vice President	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Mr. Timothy W Cook		Date of Receipt
Mailing Address P O Box 9400		09 16 2008
City	State Zip Code	Transaction ID: 15915043
Sebring FEC ID number of contributing federal political committee.	FL 33871-9400	Amount of Each Receipt this Period 250.00
Name of Employer Florida Hospital Heartland Medical Cen	Occupation President and Chief Executive Officer	_
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)		1000.00
TOTAL This Period (last page this line number	only)	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 39 / 149 (check only one) X 11a 11b 11c 12 13 14 15 16 11
An	y information copied from such Reports and St for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	atements may not be sold or used by any pename and address of any political committee	erson for the purpose of soliciting contributions e to solicit contributions from such committee.
\ <u>/</u> \a.	Full Name (Last, First, Middle Initial) Mr. Robert Brehm Mailing Address 1199 Pleasant Valley V	V ay	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: 15918269
	West Orange FEC ID number of contributing federal political committee.	NJ 07052-1424	Amount of Each Receipt this Period 306.25
	Name of Employer Kessler Institute for Reh- abilitation Receipt For: Primary General Other (specify) ▼	Occupation President Aggregate Year-to-Date 306.25	
3.	Full Name (Last, First, Middle Initial) Dr. Bruce M Gans, M.D. Mailing Address 6 Amherst Road		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: 15918288
	Chatham FEC ID number of contributing federal political committee.	NJ 07928-1802	Amount of Each Receipt this Period 306.25
	Name of Employer Kessler Institute for Reh- abilitation Receipt For: Primary General Other (specify) ▼	Occupation Executive Vice President and Chie Aggregate Year-to-Date ▼ 306.25	f Med
	Full Name (Last, First, Middle Initial)		Data of Danaint
•	Mr. Sean J. Hopkins Mailing Address 6180 Lower Mountain F	Road	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
	City New Hope	State Zip Code	Transaction ID: 15918292
	FEC ID number of contributing federal political committee.	PA 18938-5760	Amount of Each Receipt this Period 5.00
	Name of Employer New Jersey Hospital Assoc- iation	Occupation Sr. VP., Health Economics	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 248.35	
s	UBTOTAL of Receipts This Page (optional)		617.50

Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any person e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full)		
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Fredrick J. Jacobs		Date of Receipt
Mailing Address 760 Alexander Road	Ctata 7in Cada	0 9 1 2 2 0 0 8
City Princeton	State Zip Code NJ 08540-6305	Transaction ID: 15918293 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	5.00
Name of Employer New Jersey Hospital Assoc- iation	Occupation General Counsel	_
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 265.00	
Full Name (Last, First, Middle Initial) Mr. Al Maghazehe		Date of Receipt
Mailing Address 750 Brunswick Avenu	e	09 12 2008
City	State Zip Code	Transaction ID: 15918301
Trenton	NJ 08638-4143	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1819.00
Name of Employer Capital Health System	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1819.00	
Full Name (Last, First, Middle Initial) Mr. Roger D. Sarao, Jr.		Date of Receipt
Mailing Address 4 Poppy Lane		09 12 YYYY 2008
City	State Zip Code	Transaction ID: 15918313
Howell FEC ID number of contributing federal political committee.	NJ 07731-1451	Amount of Each Receipt this Period 5.00
Name of Employer New Jersey Hospital Assoc- iation	Occupation VP Health Economics	_
Receipt For:	Aggregate Year-to-Date ▼	7
Primary General Other (specify) ▼	205.00	
SUPTOTAL of Possints This Page (entional)		1829.00
SUBTOTAL of Receipts This Page (optional) . TOTAL This Period (last page this line number	<u> </u>	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 41 / 149 (check only one) X
A oi	ny information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any perso e name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	American Hospital Association PAC		
۸.	Full Name (Last, First, Middle Initial) Ms. Valerie Sellers		Date of Receipt
	Mailing Address 82 Millers Grove Road		09 / 12 / Y Y Y Y Y Y Y
	City Belle Mead	State Zip Code NJ 08502-4306	Transaction ID: 15918315 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	5.00
	Name of Employer New Jersey Hospital Assoc- iation	Occupation Senior V.P., Health Planning & Resea	ar¢
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00	
	Full Name (Last, First, Middle Initial) Ms. Belinda Brown Cooper Mailing Address 121 Clear Creek Road		Date of Receipt
	Maining Address 121 Clear Creek Hoad		09 19 2008
	City Langhorne	State Zip Code PA 19047-2306	Transaction ID: 15918331
	FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 125.00
	Name of Employer New Jersey Hospital Assoc- iation	Occupation Vice President, Human Resources	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 210.00	
_	Full Name (Last, First, Middle Initial) Mr. Sean J. Hopkins		Date of Receipt
	Mailing Address 6180 Lower Mountain	Road	09 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: 15918339
	New Hope FEC ID number of contributing federal political committee.	PA 18938-5760	Amount of Each Receipt this Period 5.00
	Name of Employer New Jersey Hospital Assoc- iation	Occupation Sr. VP., Health Economics	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 253.35	
			135.00

City Howell State Zip Code NJ 07731-1451 FEC ID number of contributing federal political committee. Name of Employer New Jersey Hospital Association Receipt For: Primary Other (specify) ▼ Pall Name (Last, First, Middle Initial) Ms. Valerie Sellers NJ 07731-1451 Amount of Each Receipt this Period C. 5.00 Transaction ID: 15918353 Amount of Each Receipt this Period 5.00 5.00 Date of Receipt Date of Receipt	SCHEDULE A (FEC Form SITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 42 / 149 (check only one) X 11a 11b 11c 12 13 14 15 16 17
A. Merican Hospital Association PAC Full Name (Last, First, Middle Initial) Milling Address 760 Alexander Road City Princeton FEC ID number of contributing federal political committee Number of Employer New Jersey Hospital Association Receipt For: Politinary General Other (specify) ▼ FEC ID number of contributing federal political committee Cupation Receipt For: Politinary General Counsel Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) Milling Address 4 Poppy Lane City Howell FEC ID number of contributing federal political committee City Howell FEC ID number of contributing federal political committee City Howell FEC ID number of contributing federal political committee Cupation FEC ID number of contributing federal political committee Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) Milling Address & 2 Millers Grove Road City Full Name (Last, First, Middle Initial) Milling Address & 2 Millers Grove Road City Belle Mead Number of Employer Malling Address & 2 Millers Grove Road City Belle Mead Number of Cocupation Number of Employer Number of Emplo	or for commercial purposes, other than us	and Statements may not be sold or used by any person ng the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
A. Mr. Fredrick J. Jacobs Mailing Address 760 Alexander Road City State Zip Code Princeton N.J 08540-6305 FEC ID number of contributing federal political committee. Name of Employer New Jersey Hospital Association Inc. 15918341 Amount of Each Receipt this Period Transaction ID: 15918341 Amount of Each Receipt this Period City State Zip Code N.J 07731-1451 FEC ID number of contributing federal political committee. City State Zip Code N.J 07731-1451 FEC ID number of contributing federal political committee. Coccupation VP Health Economics Name of Employer New Jersey Hospital Association Receipt For: Primary General Other (pacify) ▼ 200.8 Transaction ID: 15918353 Amount of Each Receipt this Period Transaction ID: 15918353 Amount of Each Receipt this Period Transaction ID: 15918353 Amount of Each Receipt this Period Transaction ID: 15918353 Amount of Each Receipt this Period Transaction ID: 15918353 Transaction ID: 15918353 Amount of Each Receipt this Period Transaction ID: 15918354 Amount of Each Receipt this Period Transaction ID: 15918353 Transaction ID: 15918353 Amount of Each Receipt this Period Transaction ID: 15918353 Amount of Each Receipt this Period Transaction ID: 15918353 Transaction ID: 15918353 Amount of Each Receipt this Period Transaction ID: 15918354 Transaction ID: 15918354 Amount of Each Receipt this Period Transaction ID: 15918354 Transaction ID: 15918354 Amount of Each Receipt this Period Transaction ID: 15918354 Amount of Each Receipt this Period Transaction ID: 15918354 Transaction ID: 15918354 Amount of Each Receipt this Period Transaction ID: 15918354 Transaction ID: 15918355 Transaction		AC	
City State Zip Code Princeton NJ 08540-6305 FEC ID number of contributing federal political committee. Name of Employer Now Jossey Hospital Association Primary General Counsel	Mr. Fredrick J. Jacobs		<u> </u>
Princeton Princeton FEC ID number of contributing federal political committee. C Name of Employer New Jersey Hospital Association City Name of Employer New Jersey Hospital Association FEC ID number of contributing federal political committee. City Name of Employer New Jersey Hospital Association Receipt For: Primary General City State Zip Code NJ 07731-1451 FEC ID number of contributing federal political committee. City Name of Employer New Jersey Hospital Association Receipt For: Primary General City State Zip Code NJ 07731-1451 FEC ID number of contributing federal political committee. C Cupation VP Health Economics Aggregate Year-to-Date ▼ Primary Other (specify) ▼ C Date of Receipt Date of Receipt N → N → N → N → N → N → N → N → N → N			09 19 2008
FEC ID number of contributing federal political committee. Name of Employer New Jersey Hospital Association Receipt For: Primary General Counsel Aggregate Year-to-Date ▼ Pull Name (Last, First, Middle Initial) Mr. Roger D. Sarao, Jr. Mailing Address 4 Poppy Lane City State Zip Code NJ 07731-1451 FEC ID number of contributing federal political committee. Name of Employer New Jersey Hospital Association Receipt For: Primary General Coccupation VP Health Economics Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ State Zip Code NJ 07731-1451 FEC ID number of contributing federal political committee. City State Zip Code NJ 07731-1451 Full Name (Last, First, Middle Initial) Ms. Valerie Sellers Mailing Address 82 Millers Grove Road City State Zip Code NJ 08502-4306 Fell Name (Last, First, Middle Initial) Ms. Valerie Sellers Mailing Address 82 Millers Grove Road City State Zip Code NJ 08502-4306 FEC ID number of contributing federal political committee. C State Zip Code NJ 08502-4306 FEC ID number of contributing federal political committee. C Aggregate Year-to-Date ▼			
Receipt For:	FEC ID number of contributing		
Aggregate Year-to-Date ▼ Primary		'	
Mailing Address 4 Poppy Lane City State Zip Code NJ 07731-1451 FEC ID number of contributing federal political committee. Name of Employer New Jersey Hospital Association City State Zip Code NJ 07731-1451 FEC ID number of contributing federal political committee. C State Sip Code NJ 07731-1451 Amount of Each Receipt this Period Source State Sip Code Needed Source State Sip Code State Sip Code State Sip Code State Sip Code Source	Receipt For: Primary General		
City State Zip Code Howell NJ 07731-1451 FEC ID number of contributing federal political committee. City State Zip Code NJ 07731-1451 C C Transaction ID: 15918353 Amount of Each Receipt this Period C C 5.00 Transaction ID: 15918353 Amount of Each Receipt this Period 5.00 Date of Receipt Ms. Valerie Sellers Mailing Address 82 Millers Grove Road City State Zip Code Belle Mead FEC ID number of contributing federal political committee. Name of Employer New Jersey Hospital Association Feceipt For: C C 5.00 Date of Receipt Transaction ID: 15918354 Amount of Each Receipt this Period C 5.00 City State Zip Code NJ 08502-4306 FEC ID number of contributing federal political committee. Name of Employer New Jersey Hospital Association Senior V.P., Health Planning & Researc Nagregate Year-to-Date ▼ Occupation Senior V.P., Health Planning & Researc Aggregate Year-to-Date ▼	Mr. Roger D. Sarao, Jr.		Date of Receipt
Howell NJ 07731-1451 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Name of Employer New Jersey Hospital Association Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Ms. Valerie Sellers Mailing Address 82 Millers Grove Road City State Zip Code Belle Mead NJ 08502-4306 FEC ID number of contributing federal political committee. Name of Employer New Jersey Hospital Association Receipt For: Name of Employer New Jersey Hospital Association Receipt For: Primary General Occupation Senior V.P., Health Planning & Researc Aggregate Year-to-Date ▼ Occupation Senior V.P., Health Planning & Researc Aggregate Year-to-Date ▼	Mailing Address 4 Poppy Lane		
FEC ID number of contributing federal political committee. Name of Employer New Jersey Hospital Association VP Health Economics	•	·	
Name of Employer New Jersey Hospital Association Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Ms. Valerie Sellers Mailing Address 82 Millers Grove Road City State Zip Code Belle Mead NJ 08502-4306 FEC ID number of contributing federal political committee. Name of Employer New Jersey Hospital Association Receipt For: Primary General Occupation Senior V.P., Health Planning & Researc Aggregate Year-to-Date ▼ Occupation Senior V.P., Health Planning & Researc Aggregate Year-to-Date ▼	FEC ID number of contributing		
iation Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Ms. Valerie Sellers Mailing Address 82 Millers Grove Road City State Zip Code Belle Mead NJ 08502-4306 FEC ID number of contributing federal political committee. Name of Employer New Jersey Hospital Association Receipt For: Primary General Aggregate Year-to-Date ▼ Date of Receipt Transaction ID: 15918354 Amount of Each Receipt this Period 5.00	Name of Employer		-
Primary General Other (specify) ▼	iation		_
Mailing Address 82 Millers Grove Road City State Zip Code Belle Mead NJ 08502-4306 FEC ID number of contributing federal political committee. Name of Employer New Jersey Hospital Association Receipt For: Primary General Date of Receipt M M M O 9 1 9 2 0 0 8 Transaction ID: 15918354 Amount of Each Receipt this Period 5.00	Primary General		
City Belle Mead NJ 08502-4306 FEC ID number of contributing federal political committee. Name of Employer New Jersey Hospital Association Receipt For: Primary General State Zip Code NJ 08502-4306 Transaction ID: 15918354 Amount of Each Receipt this Period 5.00 C Aggregate Year-to-Date Occupation Senior V.P., Health Planning & Researc Aggregate Year-to-Date OSS 60	, , , , , , , , , , , , , , , , , , , ,		Date of Receipt
Belle Mead NJ 08502-4306 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. C Name of Employer New Jersey Hospital Association Receipt For: Primary General Amount of Each Receipt this Period 5.00 Amount of Each Receipt this Period Amount of Each Receipt this Period 5.00	Mailing Address 82 Millers Grove	Road	
FEC ID number of contributing federal political committee. Name of Employer New Jersey Hospital Association Receipt For: Primary General C Socioupation Senior V.P., Health Planning & Researc Aggregate Year-to-Date ▼	•	·	
New Jersey Hospital Association Receipt For: Primary Senior V.P., Health Planning & Researc Aggregate Year-to-Date Aggregate Year-to-Date	FEC ID number of contributing		
Receipt For: Primary General Aggregate Year-to-Date One of the state of the s			re
	Receipt For: Primary General	Aggregate Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional)	SUBTOTAL of Receipts This Page (optic	onal)	15.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 43 / 149 (check only one) X 11a 11b 11c 12 13 14 15 16 11
	Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	atements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
\ \.	Full Name (Last, First, Middle Initial) Olga Dazzo Mailing Address 1111 Crandon Blvd., A	-507		Date of Receipt
	City	State	Zip Code	0 9 1 6 2 0 0 8 Transaction ID: 15918362
	Key Biscayne	FL	33149-2623	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Jackson Health System	Occupation Senior V	on lice President	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 250.00	
- 3.	Full Name (Last, First, Middle Initial) Mr. Jeff Feasel			Date of Receipt
	Mailing Address 303 North Clyde Morris	Blvd		09 16 2008
	City	State	Zip Code	Transaction ID: 15918375
	Daytona Beach	FL	32114-2709	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Name of Employer Halifax Community Health System	Occupation Chief Ex	on ecutive Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
_	Full Name (Last, First, Middle Initial) Mr. William A Giudice			Date of Receipt
	Mailing Address 1300 Miccosukee Road	I		0 9 1 6 2 0 0 8
	City	State	Zip Code	Transaction ID: 15918390
	Tallahassee	FL	32308-5093	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Tallahassee Memorial Heal- thCare		nancial Officer and Vice Pres	i
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
	SUBTOTAL of Receipts This Page (optional)			750.00
+	TOTAL This Period (last page this line number of			

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 44 / 149 (check only one) X 11a
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any pers e name and address of any political committee to	on for the purpose of soliciting contributions
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Lars Houmann		Date of Receipt
Mailing Address 601 East Rollins Stre		09 / 16 / 2008
City Orlando	State Zip Code FL 32803-1248	Transaction ID: 15918403 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	550.00
Name of Employer Florida Hospital	Occupation President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	
Full Name (Last, First, Middle Initial) Dr Gerard A Kaiser, , M.D. Mailing Address 1611 NW 12th Avenu	e	Date of Receipt
City	State Zip Code	0 9 1 6 2 0 0 8 Transaction ID: 15918409
<u>Miami</u>	FL 33136-1094	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Jackson Health System	Occupation Executive Vice President and Chief N	— √le¢l
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr Steven M Klein		Date of Receipt
Mailing Address 1611 NW 12th Avenu	е	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Miami	State Zip Code FL 33136-1005	Transaction ID: 15918415
FEC ID number of contributing federal political committee.	FL 33136-1005	Amount of Each Receipt this Period 250.00
Name of Employer Jackson Health System	Occupation Executive Vice President and Chief (——————————————————————————————————————
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)	•	1050.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 45 / 149 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and Sor for commercial purposes, other than using the	Statements may not be sold or used by any perso e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
۷ A.	Full Name (Last, First, Middle Initial) Dr. John Mahoney, MD		Date of Receipt
	Mailing Address 2920 Ivanahoe Road		09 16 2008
	City <u>Tallahassee</u>	State Zip Code FL 32312-2824	Transaction ID: 15918564
	FEC ID number of contributing federal political committee.	C 32312-2024	Amount of Each Receipt this Period 250.00
	Name of Employer Tallahassee Memorial Heal- thCare	Occupation Chief Medical Officer	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	250.00	
- В.	Full Name (Last, First, Middle Initial) Mr. Isaac Mallah	ı	Date of Receipt
	Mailing Address P O Box 4227		09 16 2008
	City	State Zip Code	Transaction ID: 15918565
	<u>Tampa</u>	FL 33677-4227	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer St. Joseph's Hospital	Occupation President and Chief Executive Officer	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	250.00	
с. С.	Full Name (Last, First, Middle Initial) Mr. Stephen Mason		Date of Receipt
	Mailing Address 3909 Snapper Pointe	Drive	09 16 2008
	City	State Zip Code	Transaction ID: 15918566
	<u>Tampa</u>	FL 33611-1030	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer BayCare Health System	Occupation President & CEO	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	500.00	
	SUBTOTAL of Receipts This Page (optional) .		1000.00
	TOTAL This Period (last page this line number	·	

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 46 / 149 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAC	d Statements may not be sold or used by any person the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Jason Moore Mailing Address 2112 Doral Drive City Tallahassee	State Zip Code FL 32312-3159	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer Tallahassee Memorial HealthCare Receipt For: □ Primary □ General Other (specify) ▼	Occupation Chief Operating Officer Aggregate Year-to-Date 250.00	250.00
Full Name (Last, First, Middle Initial) Dennis Proul Mailing Address 11873 Wexford Blvd City Spring Hill	d. State Zip Code FL 34609-9260	Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer Jackson Health System Receipt For: Primary General Other (specify)	C Occupation SVP&CIO Aggregate Year-to-Date ▼ 250.00	250.00
Full Name (Last, First, Middle Initial) Deanna Schaefer Mailing Address 16 Remington Road City Ormond Beach FEC ID number of contributing	State Zip Code FL 32174-2527	Date of Receipt M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
federal political committee. Name of Employer Halifax Health Medical Center Receipt For: Primary General Other (specify) ▼	Occupation Administrator Aggregate Year-to-Date 250.00	250.00
SUBTOTAL of Receipts This Page (optional] 	750.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 47 / 149 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using	d Statements may not be sold or used by any perso the name and address of any political committee to	
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Alfred G Stubblefield		Date of Receipt
Mailing Address 1717 North 'E' Stree	•	09 16 2008
City	State Zip Code	Transaction ID: 15919993
<u>Pensacola</u>	FL 32501-6377	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Baptist Health Care Corpo- ration	Occupation President	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Mr. James D. Jackson		Date of Receipt
Mailing Address Post Office Box 668		09 16 YYYYY 16 2008
City	State Zip Code	Transaction ID: 15922746
Prestonsburg	KY 41653-0668	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Highlands Regional Medical Center	Occupation Chief Information Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	350.00	
Full Name (Last, First, Middle Initial) Mr. Michael J Gibbons	_ I	Date of Receipt
Mailing Address 109 Brittany Court		09 16 2008
City	State Zip Code	Transaction ID: 15922768
Lakeside Park	KY 41017-2101	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer St. Elizabeth Medical Cen- ter-North	Occupation Trustee	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
		1100.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 48 / 149 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any person e name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Connie Smith Mailing Address P O Box 90010 City Bowling Green FEC ID number of contributing federal political committee. Name of Employer Medical Center at Bowling Green, The Receipt For: Primary General Other (specify)	State Zip Code KY 42102-9010 C Occupation Chief Executive Officer Aggregate Year-to-Date 1000.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr. Robert D Fraraccio, , CHE Mailing Address P O Box 630 City Winchester FEC ID number of contributing federal political committee. Name of Employer Clark Regional Medical Center Receipt For: Primary General Other (specify)	State Zip Code KY 40392-0630 C Occupation Chief Executive Officer Aggregate Year-to-Date 1000.00	Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr. Robert L. Shircliff Mailing Address 2104 Rudy Lane City Louisville FEC ID number of contributing federal political committee. Name of Employer Jewish Hospital & St. Mar- y's HealthCar Receipt For: Primary General Other (specify)	State Zip Code KY 40207-1204 C Occupation Senior Vice President Aggregate Year-to-Date 1000.00	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional) .		3000.00

	DULE A (FEC Form 3X) ZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 49 / 149 (check only one) X
or for com	mation copied from such Reports and St nmercial purposes, other than using the OF COMMITTEE (In Full) rican Hospital Association PAC	atements may name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
A. Alan C Mailing City Corbi		State KY	Zip Code 40701-8426	Date of Receipt M M M D D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name Oak T Receip	D number of contributing I political committee. of Employer ree Hospital ot For: Primary	Occupation Presiden Aggregate		350.00
Anthor	ame (Last, First, Middle Initial) ny Powers g Address 1 Trillium Way	State	Zip Code	Date of Receipt M M D D V Y Y Y Y Y Y Y Y Y
Corbi FEC II federa Name Baptis Cente Receip	D number of contributing I political committee. of Employer t Regional Medical	C Occupation VP of Pa	40701-8426	Amount of Each Receipt this Period 350.00
Ms. Sr Mailing City Burlin		State MA	Zip Code 01803-3766	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name Massa of Nur Receip			n e Director e Year-to-Date ▼	100.00
SUBTO	FAL of Receipts This Page (optional)			800.00

CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 50 / 149 (check only one) X 11a 11b 11c 12 13 14 15 16
ny information copied from such Reports and strong commercial purposes, other than using the	Statements may not be sold or used by any pe e name and address of any political committee	rson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Terry Peeples		Date of Receipt
Mailing Address P O Box 2400	01.12 7'- 0d-	09 16 2008
City Hopkinsville	State Zip Code KY 42241-2400	Transaction ID: 15924741 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Jennie Stuart Medical Cen- ter	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Mr. Ken Haynes	<u></u>	Date of Receipt
Mailing Address One Saint Joseph Dri	ve	09 16 2008
City	State Zip Code KY 40504-3742	Transaction ID: 15924742
Lexington FEC ID number of contributing federal political committee.	KY 40504-3742	Amount of Each Receipt this Period 350.00
Name of Employer Saint Joseph Hospital	Occupation President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Ms. Sherrie Newcomb		Date of Receipt
Mailing Address P O Box 472		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Jenkins	State Zip Code KY 41537-0472	Transaction ID: 15924764
FEC ID number of contributing federal political committee.	C 41537-0472	Amount of Each Receipt this Period 350.00
Name of Employer Jenkins Community Hospital	Occupation Administrator	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (optional) .		1700.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 51 / 149 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements may name and ado	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Mr. Bernard L Mattingly			Date of Receipt
Mailing Address P O Box 340			09 18 2008
City	State	Zip Code	Transaction ID: 15925187
Cookeville	TN	38503-0340	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Cookeville Regional Medic-	Occupation		
al Center Receipt For:		ecutive Officer Year-to-Date Vear-to-Date	-
Primary General Other (specify) ▼	Aggregate	500.00	
Full Name (Last, First, Middle Initial) Debra Moore			Date of Receipt
Mailing Address 2525 De Sales Avenue	ı		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 15925188
Chattanooga	TN	37404-1161	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Memorial Health Care Syst- em	Occupation Interim C		
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. John Sackett			Date of Receipt
Mailing Address 100 Health Park Drive			0 9 1 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 15927586
Louisville	CO	80027-9583	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Avista Adventist Hospital	Occupation Chief Exe	n ecutive Officer	
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)			1250.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 52 / 149 (check only one) X 11a 11b 11c 12 13 14 15 16 17
(Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
∠ 4 .	Full Name (Last, First, Middle Initial) Mr. James W Boyle Mailing Address 2525 South Downing S	Stroot		Date of Receipt
	City	State	Zip Code	0 9 1 7 2 0 0 8 Transaction ID: 15927597
	Denver	CO	80210-5876	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Porter Adventist Hospital	Occupatio Chief Ex	n ecutive Officer	7
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 250.00	
- 3.	Full Name (Last, First, Middle Initial) Ms. Lesley Radocy Mailing Address 100 Health Bark Drives			Date of Receipt
	Mailing Address 100 Health Park Drive			09 17 2008
	City	State	Zip Code	Transaction ID: 15927600
	Louisville FEC ID number of contributing federal political committee.	CO	80027-9583	Amount of Each Receipt this Period 250.00
	Name of Employer Avista Adventist Hospital	Occupatio Trustee	n	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 250.00	
_	Full Name (Last, First, Middle Initial) Arlen Reynolds			Date of Receipt
•	Mailing Address 1888 Inverness Drive V	Vest, #500		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 15927608
	Englewood	CO	80112	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		725.00
	Name of Employer Centura Health	Occupation Chief Ex	n ecutive Officer Interim	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 725.00	
ſ	SUBTOTAL of Receipts This Page (optional)			1225.00
t	TOTAL This Period (last page this line number)			

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 53 / 149 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may rename and address	not be sold or used by any personss of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Gary Campbell			Date of Receipt
Mailing Address 188 Inverness Drive W			09 / 17 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Englewood	State CO	Zip Code 80112-5204	Transaction ID: 15927617
FEC ID number of contributing federal political committee.	C	00112-3204	Amount of Each Receipt this Period 250.00
Name of Employer Centura Health	Occupation CEO		7
Receipt For: Primary General Other (specify)	, .	rear-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Gerard J. Grimaldi			Date of Receipt
Mailing Address 12206 Washington Co	ourt		09 16 2008
City	State	Zip Code	Transaction ID: 15928795
Kansas City	MO	64145-1761	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		225.00
Name of Employer Truman Medical Centers	Occupation VP, Health	Policy & Governmental R	elat
Receipt For: Primary General Other (specify)	Aggregate Y	/ear-to-Date ▼ 225.00]
Full Name (Last, First, Middle Initial) Ms. Mary C. Becker			Date of Receipt
Mailing Address 7800 South Eagle Roa	ıd		09 16 2008
City <u>Columbia</u>	State MO	Zip Code	Transaction ID: 15928804
FEC ID number of contributing federal political committee.	C	65203-9017	Amount of Each Receipt this Period 19.45
Name of Employer Missouri Hospital Associa-	Occupation Senior VP	, Commc. & Health Improv	ement
tion Receipt For:		'ear-to-Date ▼	
Primary General Other (specify) ▼		330.65]
SUBTOTAL of Receipts This Page (optional)	1		494.45
TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 54 / 149 (check only one) X
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAC	the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Mr. Dwight L. Fine Mailing Address 12675 Riviera Heigl	nts Road		Date of Receipt
City Holts Summit	State MO	Zip Code 65043-2039	Transaction ID: 15928811 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		55.56
Name of Employer Missouri Hospital Association Receipt For: Primary General Other (specify) ▼	Sr. Vice I	President, Health Policy Year-to-Date ▼ 944.52	
Full Name (Last, First, Middle Initial) Mr. Daniel R. Landon Mailing Address 611 Belridge Drive P.O. Box 60	-		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 15928815
Jefferson City	MO	65109-0755	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		19.45
Name of Employer Missouri Hospital Associa- tion Receipt For:		President, Governmental Re	lat
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 330.65	
Full Name (Last, First, Middle Initial) Ms. Kathleen C. Poff	'		Date of Receipt
Mailing Address 5119 Coventry Way	re		09 16 2008
City	State	Zip Code	Transaction ID: 15928832
Jefferson City FEC ID number of contributing federal political committee.	C	65101-8284	Amount of Each Receipt this Period 19.45
Name of Employer Missouri Hospital Associa- tion	 	ce President & CFO	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 330.65	
SUBTOTAL of Receipts This Page (optiona	l)		94.46

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)	I Statements may not be sold or used by any person he name and address of any political committee to s	for the purpose of soliciting contributions solicit contributions from such committee.
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Marc D. Smith		Date of Receipt
Mailing Address 5612 Tanner Bridge	Road	09 16 2008
City	State Zip Code	Transaction ID: 15928842
Jefferson City	MO 65101-8275	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	55.56
Name of Employer Missouri Hospital Associa-	Occupation	1
tion Receipt For:	President and Chief Executive Officer	-
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 944.52	
Full Name (Last, First, Middle Initial) Ms. Margaret Hinson	_1	Date of Receipt
Mailing Address 1824 Jones Road		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 15930138
Weiser	ID 83672-5536	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Weiser Memorial Hospital	Occupation Board Chair	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Don Soltman		Date of Receipt
Mailing Address 5421 West Fairway	Lane #12	09 19 2008
City	State Zip Code	Transaction ID: 15930139
Rathdrum	ID 83858-6673	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Kootenai Medical Center	Occupation Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)	·····	555.56

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 56 / 149 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Ar or	y information copied from such Reports and for commercial purposes, other than using th	Statements may not be sold or used by any per- e name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Ms. Gary L. Fletcher		Date of Receipt
	Mailing Address 1249 Harcourt Drive		09 / 19 / 2008
	City Boise	State Zip Code ID 83702-1839	Transaction ID: 15930140 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer St. Luke's Regional Medic- al Center	Occupation Chief Executive Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
	Full Name (Last, First, Middle Initial) Ms. Sheryl Rickard		Date of Receipt
	Mailing Address Box 1448		0 9 1 9 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: 15930141
	Sandpoint FEC ID number of contributing federal political committee.	ID 83864-0877	Amount of Each Receipt this Period 250.00
	Name of Employer Bonner General Hospital	Occupation Chief Executive Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
	Full Name (Last, First, Middle Initial) Patrick Foster		Date of Receipt
	Mailing Address 420 Pearre Springs V	Vay	09 22 7 2008
	City	State Zip Code	Transaction ID: 15933630
	Franklin FEC ID number of contributing federal political committee.	TN 37064-4834	Amount of Each Receipt this Period 250.00
	Name of Employer St. John's Mercy Health Care	Occupation CEO	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
	IIRTOTAL of Receipts This Page (optional)		750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 57 / 149 (check only one) X
Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may not be sold or used by any perso name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Richard E. Meiers Mailing Address 908 Hokulani Street City Honolulu FEC ID number of contributing federal political committee. Name of Employer Healthcare Association of Hawaii Receipt For: Primary General Other (specify)	State Zip Code HI 96825-1021 C Occupation President Aggregate Year-to-Date 500.00	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr. Thomas Sommers Mailing Address 2006 Irving Street City Beatrice FEC ID number of contributing federal political committee. Name of Employer Beatrice Community Hospital and Health Receipt For: Primary General Other (specify)	State Zip Code NE 68310-2265 C Occupation Chief Executive Officer Aggregate Year-to-Date ▼ 350.00	Date of Receipt M M M / D D / 2 3 / 2 0 0 8 Transaction ID: 15933651 Amount of Each Receipt this Period 350.00
Full Name (Last, First, Middle Initial) Steven Kapfhammer Mailing Address P.O. Box 1522 City Boston FEC ID number of contributing federal political committee. Name of Employer North Shore Medical Center Receipt For: Primary General Other (specify)	State Zip Code MA 02117-1522 C Occupation Executive VP Aggregate Year-to-Date ▼	Date of Receipt M M C 2 4 2 0 0 8 Transaction ID: 15933741 Amount of Each Receipt this Period 250.00
SUBTOTAL of Receipts This Page (optional)		1100.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 58 / 149 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and St or for commercial purposes, other than using the	atements may not be sold or used by any per name and address of any political committee	
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Dennis W. Chalke		Date of Receipt
Mailing Address 80 Jonquil Lane		09 24 2008
City	State Zip Code	Transaction ID: 15933742
Longmeadow	MA 01106-2240	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Baystate Medical Center	Occupation Vice President, Finance	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Mr. Keith C. McLean-Shinaman		Date of Receipt
Mailing Address 53n Hayes Road		0 9 2 4 2 0 0 8
City	State Zip Code	Transaction ID: 15933743
<u>Tariffville</u>	CT 06081-9631	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Baystate Health, Inc.	Occupation Chief Financial Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Mr. Steven F Bradley		Date of Receipt
Mailing Address 759 Chestnut Street		09 24 YYYYY 2008
City	State Zip Code	Transaction ID: 15933744
Springfield	MA 01199-0001	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Baystate Health, Inc.	Occupation Vice President Government Relation	ns
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (optional)		950.00

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 59 / 149 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Report or for commercial purposes, other than us NAME OF COMMITTEE (In Full) American Hospital Association I	s and Statements may not be sold or used by any perso sing the name and address of any political committee to PAC	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Mark R Tolosky, , FACHE, J Mailing Address 759 Chestnut St City	State Zip Code	Date of Receipt M M C D C C C
Springfield FEC ID number of contributing federal political committee.	MA 01199-1001	Amount of Each Receipt this Period 350.00
Name of Employer Baystate Health, Inc. Receipt For: Primary General Other (specify) ▼	Occupation President and Chief Executive Officer Aggregate Year-to-Date 350.00	
Full Name (Last, First, Middle Initial) Mr. John O Wilhelm, Jr. Mailing Address 85 Herrrick Street	et	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Beverly FEC ID number of contributing federal political committee.	State Zip Code MA 01915-1777	Transaction ID: 15933747 Amount of Each Receipt this Period 1000.00
Name of Employer Emerson Hospital Receipt For:	Occupation Executive Vice President & Chief Final Aggregate Year-to-Date	an
Primary General Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial) Michael Curren Mailing Address 223 Franklin St.		Date of Receipt
City Reading	State Zip Code MA 01867-1030	Transaction ID: 15933748 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Massachusetts Hospital Association Receipt For:	Occupation Sr. VP of Member Relations Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (opt	ional)	1600.00

Any information copied from such Reports or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) American Hospital Association PA Full Name (Last, First, Middle Initial) Mr Kevin Smith Mailing Address 41 Highland Avenuation of Employer Winchester Hospital Receipt For: Primary General Other (specify) Mailing Address 1 Alpine Circle City Wakefield FEC ID number of contributing federal political committee. Name of Employer Mailing Address 1 Alpine Circle City Wakefield FEC ID number of contributing federal political committee. Name of Employer Winchester Hospital Receipt For: Primary General Other (specify) Cher (specify) Mailing Address 41 Highland Avenuation of Employer Mailing Address 41 Highland Avenuation of Employer Winchester FEC ID number of contributing federal political committee. Name of Employer Winchester FEC ID number of contributing federal political committee. Name of Employer Winchester FEC ID number of contributing federal political committee. Name of Employer Winchester Hospital		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
A. Full Name (Last, First, Middle Initial) Mr Kevin Smith Mailing Address 41 Highland Avenu City Winchester FEC ID number of contributing federal political committee. Name of Employer Winchester Hospital Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Kathy Schuler Mailing Address 1 Alpine Circle City Wakefield FEC ID number of contributing federal political committee. Name of Employer Winchester Hospital Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Dale M Lodge Mailing Address 41 Highland Avenu City Winchester FEC ID number of contributing federal political committee.	State Zip Code MA 01890-1496 C Occupation Vice President Finance and Administr Aggregate Year-to-Date	Transaction ID: 15933749 Amount of Each Receipt this Period 250.00
A. Mr Kevin Smith Mailing Address 41 Highland Avenual City Winchester FEC ID number of contributing federal political committee. Name of Employer Winchester Hospital Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Kathy Schuler Mailing Address 1 Alpine Circle City Wakefield FEC ID number of contributing federal political committee. Name of Employer Winchester Hospital Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Dale M Lodge Mailing Address 41 Highland Avenual City Winchester FEC ID number of contributing federal political committee.	State Zip Code MA 01890-1496 C Occupation Vice President Finance and Administr Aggregate Year-to-Date	Transaction ID: 15933749 Amount of Each Receipt this Period 250.00
City Winchester FEC ID number of contributing federal political committee. Name of Employer Winchester Hospital Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Kathy Schuler Mailing Address 1 Alpine Circle City Wakefield FEC ID number of contributing federal political committee. Name of Employer Winchester Hospital Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Dale M Lodge Mailing Address 41 Highland Avenue City Winchester FEC ID number of contributing federal political committee.	State Zip Code MA 01890-1496 C Occupation Vice President Finance and Administr Aggregate Year-to-Date	Transaction ID: 15933749 Amount of Each Receipt this Period 250.00
Winchester FEC ID number of contributing federal political committee. Name of Employer Winchester Hospital Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Kathy Schuler Mailing Address 1 Alpine Circle City Wakefield FEC ID number of contributing federal political committee. Name of Employer Winchester Hospital Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Dale M Lodge Mailing Address 41 Highland Avenual City Winchester FEC ID number of contributing federal political committee.	MA 01890-1496 C Occupation Vice President Finance and Administr Aggregate Year-to-Date ▼	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. Name of Employer Winchester Hospital Receipt For: Primary General Other (specify) Mailing Address 1 Alpine Circle City Wakefield FEC ID number of contributing federal political committee. Name of Employer Winchester Hospital Receipt For: Primary General Other (specify) City Mailing Address 41 Highland Avenuation Address 41 Highland Avenuation Address 41 Highland Avenuation FEC ID number of contributing federal political committee.	Occupation Vice President Finance and Administr Aggregate Year-to-Date	250.00
Receipt For: Primary Other (specify) Full Name (Last, First, Middle Initial) Kathy Schuler Mailing Address 1 Alpine Circle City Wakefield FEC ID number of contributing federal political committee. Name of Employer Winchester Hospital Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) Mr. Dale M Lodge Mailing Address 41 Highland Avenue City Winchester FEC ID number of contributing federal political committee.	Vice President Finance and Administr Aggregate Year-to-Date ▼	at
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Kathy Schuler Mailing Address 1 Alpine Circle City Wakefield FEC ID number of contributing federal political committee. Name of Employer Winchester Hospital Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Dale M Lodge Mailing Address 41 Highland Avenual City Winchester FEC ID number of contributing federal political committee.		
Mailing Address 1 Alpine Circle City Wakefield FEC ID number of contributing federal political committee. Name of Employer Winchester Hospital Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Dale M Lodge Mailing Address 41 Highland Avenue City Winchester FEC ID number of contributing federal political committee.		
City Wakefield FEC ID number of contributing federal political committee. Name of Employer Winchester Hospital Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Dale M Lodge Mailing Address 41 Highland Avenuation City Winchester FEC ID number of contributing federal political committee.		Date of Receipt
Wakefield FEC ID number of contributing federal political committee. Name of Employer Winchester Hospital Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Dale M Lodge Mailing Address 41 Highland Avenuation City Winchester FEC ID number of contributing federal political committee.		09 24 2008
FEC ID number of contributing federal political committee. Name of Employer Winchester Hospital Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) Mr. Dale M Lodge Mailing Address 41 Highland Avenuation City Winchester FEC ID number of contributing federal political committee.	State Zip Code	Transaction ID: 15933750
Full Name (Last, First, Middle Initial) Mr. Dale M Lodge Mailing Address 41 Highland Avenu City Winchester FEC ID number of contributing federal political committee.	MA 01880-1544	Amount of Each Receipt this Period
Receipt For: Primary Other (specify) Full Name (Last, First, Middle Initial) Mr. Dale M Lodge Mailing Address 41 Highland Avenuation City Winchester FEC ID number of contributing federal political committee.	C	250.00
Primary General Other (specify) Full Name (Last, First, Middle Initial) Mr. Dale M Lodge Mailing Address 41 Highland Avenu City Winchester FEC ID number of contributing federal political committee.	Occupation CNO	
Full Name (Last, First, Middle Initial) Mr. Dale M Lodge Mailing Address 41 Highland Avenu City Winchester FEC ID number of contributing federal political committee.	Aggregate Year-to-Date ▼	
Mr. Dale M Lodge Mailing Address 41 Highland Avenuation City Winchester FEC ID number of contributing federal political committee.	250.00	
City Winchester FEC ID number of contributing federal political committee.		Date of Receipt
Winchester FEC ID number of contributing federal political committee.	9	09 24 2008
FEC ID number of contributing federal political committee.	State Zip Code MA 01890-1496	Transaction ID: 15933751
Name of Employer Winchester Hospital	C	Amount of Each Receipt this Period 250.00
Receipt For: Primary General Other (specify) ▼	Occupation President and Chief Executive Officer	
SUBTOTAL of Receipts This Page (option	· ·	

	OULE A (FEC Form 3X) ED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 61 / 149 (check only one) X
or for comr	ation copied from such Reports and St mercial purposes, other than using the OF COMMITTEE (In Full) can Hospital Association PAC	atements may name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Mr. Way	me (Last, First, Middle Initial) yne A. Smith Address 1280 South Governors	Δνοημο		Date of Receipt
City	1200 Goulli Governors	State	Zip Code	0 9 2 4 2 0 0 8 Transaction ID: 15933966
	number of contributing political committee.	C	19904-4802	Amount of Each Receipt this Period 500.00
<u>iation</u> Receipt	of Employer re Healthcare Assoc- For: rimary General ther (specify)	Occupation Presiden Aggregate]
John A.	me (Last, First, Middle Initial) May Address 7 Sun Bonnet Lane			Date of Receipt 0 9 2 5 2 0 0 8
City		State	Zip Code	Transaction ID: 15933981
	ntown number of contributing political committee.	C	26508-2536	Amount of Each Receipt this Period 250.00
Name o Wetzel	f Employer County Hospital	Occupation Interim C		
	For: rimary General ther (specify) ♥		e Year-to-Date ▼ 250.00	
Mr. Geo	me (Last, First, Middle Initial) rge G Couch Address 36 Floral Drive			Date of Receipt
City		State	Zip Code	0 9 2 5 2 0 0 8 Transaction ID: 15933983
<u>Wheel</u>	•	WV	26003-5464	Amount of Each Receipt this Period
	number of contributing political committee.	C		250.00
Name o Wetzel	of Employer County Hospital	Occupation Chief Exe	n ecutive Officer	
	For: rimary General ther (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
SUBTOTA	AL of Receipts This Page (optional)			1000.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	ζ)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 62/149 (check only one)
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may	y not be sold or used by any perso	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American Hospital Association PAG		areas or any pontion committee to	y donor, contributions from duon committees.
Full Name (Last, First, Middle Initial) Dr Hoyt J Burdick, , M.D.			Date of Receipt
Mailing Address 251 High Drive			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Huntington	State WV	Zip Code 25705-3527	Transaction ID: 15933984 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Cabell Huntington Hospital	Occupatio Vice Pres	n sident Medical Affairs	
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Jack Phillips			Date of Receipt
Mailing Address Box 413			09 25 2008
City Ghent	State WV	Zip Code 25843-0413	Transaction ID: 15933985 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Raleigh General Hospital	Occupatio Board Mo		
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Margaret L. McDaniel			Date of Receipt
Mailing Address Rt. 4, Box 32AA			0 9 2 5 2 0 0 8
City Chapmanville	State WV	Zip Code	Transaction ID: 15933987
FEC ID number of contributing federal political committee.	C	25508-9719	Amount of Each Receipt this Period 250.00
Name of Employer Logan Regional Medical Center	Occupatio Vice Pres		
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00]
SUBTOTAL of Receipts This Page (optional	J)		750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 63 / 149 (check only one) X 11a 11b 11c 12 13 14 15 16 11
or for commercial purposes, other than using th	Statements may not be sold or used by any person e name and address of any political committee to	n for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. George Perich		Date of Receipt
Mailing Address 905 Riverview Drive City	State Zip Code	0 9 2 5 2 0 0 8 Transaction ID: 15933989
Fairmont	WV 26554-1435	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Fairmont General Hospital	Occupation Vice President Human Resourcesand	– Lega
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Kevin N Fowler		Date of Receipt
Mailing Address 10 Mountain Medado	w Estates	09 / 25 / Y Y Y Y Y
City	State Zip Code	Transaction ID: 15933992
Chapmanville	WV 25508	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Logan Regional Medical Ce- nter	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Mr. Michael A King		Date of Receipt
Mailing Address 1503 Greenmont Hills	s Drive	09 25 7 2008
City	State Zip Code	Transaction ID: 15933993
Vienna FEC ID number of contributing federal political committee.	WV 26105-3282	Amount of Each Receipt this Period 500.00
Name of Employer Camden-Clark Memorial Hos- pital	Occupation President and Chief Executive Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (optional) .		1100.00
TOTAL This Period (last page this line numbe	<u> </u>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 64 / 149 (check only one) X 11a 11b 11c 12 13 14 15 16 11
or for commercial purposes, other than using the	Statements may not be sold or used by any person e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Zarina Rasheed, MD		Date of Receipt
Mailing Address 56 Timberidge Drive City	State Zip Code	0 9 2 5 2 0 0 8 Transaction ID: 15933994
Beckley	WV 25801-3610	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Beckley Appalachian Regio- nal Hospital Receipt For: Primary General Other (specify) ▼	Occupation Medical Director (Pathology) Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Tyson Smith		Date of Receipt
Mailing Address 14 Fairway Drive		09 25 7 4 9 9
City	State Zip Code	Transaction ID: 15933995
<u>Huntington</u>	WV 25705-2149	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer St. Mary's Medical Center	Occupation Vice President, Medical Affairs]
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Todd Campbell		Date of Receipt
Mailing Address 125 Water Side Circle	9	09 25 YYYY 2008
City	State Zip Code	Transaction ID: 15933998
Winfield	WV 25213-9551	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	500.00
Name of Employer St. Mary's Medical Center	Occupation Vice President Financial Affairs and C	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)		1000.00
TOTAL This Period (last page this line numbe	r only)	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 65 / 149 (check only one) X 11a
Ar	ny information copied from such Reports and S for commercial purposes, other than using the	tatements may not be sold or used by any pers name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\rangle	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Mr. Thomas O'Connor		Date of Receipt
	Mailing Address 4050 Coon Rapids Bou	ulevard	09 26 7 2008
	City	State Zip Code MN 55433-2522	Transaction ID: 15934033
	Coon Rapids FEC ID number of contributing federal political committee.	MN 55433-2522	Amount of Each Receipt this Period 350.00
	Name of Employer Mercy Hospital	Occupation President	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
	Full Name (Last, First, Middle Initial) Mr. Arnold R. Thomas, Jr.		Date of Receipt
	Mailing Address 700 Mustang Drive		09 26 2008
	City	State Zip Code	Transaction ID: 15934086
	Bismarck FEC ID number of contributing federal political committee.	ND 58503-8204	Amount of Each Receipt this Period 350.00
	Name of Employer North Dakota Healthcare Association	Occupation President	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
	Full Name (Last, First, Middle Initial) Mr David Blackmon		Date of Receipt
	Mailing Address P O Box 129		09 29 2008
	City	State Zip Code	Transaction ID: 15943637
	Lawton FEC ID number of contributing federal political committee.	OK 73502-0129	Amount of Each Receipt this Period 250.00
	Name of Employer Comanche County Memorial Hospital	Occupation Chief Financial Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
	UBTOTAL of Receipts This Page (optional)		950.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any persone name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Joe Duerr		Date of Descirt
Mailing Address 501 14th Street		Date of Receipt M M
City	State Zip Code	Transaction ID: 15943647
Perry	OK 73077-5099	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Perry Memorial Hospital	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	
Full Name (Last, First, Middle Initial) Ms. Norma Howard		Date of Receipt
Mailing Address 1 Hospital Drive		09 29 2008
City	State Zip Code	Transaction ID: 15943653
<u>Madill</u>	OK 73446	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Johnston Memorial Hospital	Occupation Administrator	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. David E. Morton, Dr. P.H.,		Date of Receipt
Mailing Address 2825 Natchez Trail		09 29 YYYYY 2008
City Edmond	State Zip Code OK 73012-3622	Transaction ID: 15943664 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C 73012-3022	302.50
Name of Employer American Hospital Associa- tion-Chicago	Occupation Regional Executive	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 302.50	
SUBTOTAL of Receipts This Page (optional)		1052.50

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 67 / 149 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any person e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr Douglas K Weaver		Date of Receipt
Mailing Address 3401 W. Gore Blvd.	Chata Zin Coda	09 29 2008
City Lawton	State Zip Code OK 73505	Transaction ID: 15943694 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Comanche County Memorial Hospital Receipt For: Primary General Other (specify) ▼	Occupation Chief Operating Officer Aggregate Year-to-Date 250.00	
Full Name (Last, First, Middle Initial) Mr. Brian K Woodliff Mailing Address B O Bay 1000		Date of Receipt
Mailing Address P O Box 1008		09 29 2008
City	State Zip Code	Transaction ID: 15943696
<u>Tahlequah</u>	OK 74465-1008	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Tahlequah City Hospital	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. William W. W Harding		Date of Receipt
Mailing Address 1305 Independence C	Circle S.E.	09 29 2008
City	State Zip Code	Transaction ID: 15945201
New Philadelphia FEC ID number of contributing federal political committee.	OH 44663	Amount of Each Receipt this Period 250.00
Name of Employer Union Hospital	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional) .		1000.00
TOTAL This Period (last page this line numbe	<u> </u>	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 68 / 149 (check only one) X
or f	y information copied from such Reports and St for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may name and add	y not be sold or used by any persondress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
λ.	Full Name (Last, First, Middle Initial) James R Pancost Mailing Address 295 Hathaway Road City Dayton FEC ID number of contributing	State OH	Zip Code 45419-3913	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	federal political committee. Name of Employer Premier Health Partners Receipt For: □ Primary □ General □ Other (specify) ▼	Occupation Presiden Aggregate		250.00
3.	Full Name (Last, First, Middle Initial) Mr. James Akers Mailing Address 430 Thorn Hill Lane City	State	Zip Code	Date of Receipt M M D D Y Y Y Y Y Y Y Y
	Middletown FEC ID number of contributing federal political committee. Name of Employer	OH C Occupation	45042-3664 n	Amount of Each Receipt this Period 250.00
	Atrium Mediċal Center Receipt For: Primary General Other (specify)	Trustee Aggregate	e Year-to-Date ▼ 250.00	
) .	Full Name (Last, First, Middle Initial) Mr. John E. Callender Mailing Address 2743 Elginfield Road			Date of Receipt 0 9 2 9 2 0 0 8
	City Upper Arlington FEC ID number of contributing	State OH	Zip Code 43220-4247	Transaction ID: 15947783 Amount of Each Receipt this Period 50.00
	federal political committee. Name of Employer Ohio Hospital Association	Occupation	n ice President	
	Receipt For: Primary General Other (specify)		e Year-to-Date ▼ 300.00	
SI	JBTOTAL of Receipts This Page (optional)			550.00

•	EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) X 11a
A 0	ny information copied from such Reports and S for commercial purposes, other than using the	statements may not be sold or used by any per name and address of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
۷.	Full Name (Last, First, Middle Initial) Paula S Bauer		Date of Receipt
	Mailing Address 37830 Jackson Rd		09 / 29 / 2008
	City Moreland Hills	State Zip Code OH 44022-1912	Transaction ID: 15948022
	FEC ID number of contributing federal political committee.	OH 44022-1912	Amount of Each Receipt this Period 250.00
	Name of Employer Akron General Health Syst- em	Occupation Trustee	
	Receipt For: Primary General	Aggregate Year-to-Date ▼	
	Other (specify) ▼	250.00	
. –	Full Name (Last, First, Middle Initial) Mr. John Bomher		Date of Receipt
	Mailing Address 1151 E. Warrenville R	oad	09 29 2008
	City	State Zip Code	Transaction ID: 15974640
	Naperville	IL 60563-9339	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1000.00
	Name of Employer Illinois Hospital Associa- tion	Occupation VP, Associate General Counsel	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	1000.00	
_	Full Name (Last, First, Middle Initial) Ms. Darcie J. Brazel		Date of Receipt
	Mailing Address 11654 Logan Court		09 / 29 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: 15974641
	Orland Park	IL 60467-6824	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Advocate Christ Medical Center	Occupation COO, CNE	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary ☐ General Other (specify) ▼	250.00	
	NIDTOTAL of Descrite This Days (actional)		1500.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 70 / 149 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any persor name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr Richard Carlson		Date of Receipt
Mailing Address 1000 North Allen Stree City	State Zip Code	0 9 2 9 2 0 0 8
Robinson	IL 62454-1167	Transaction ID: 15974643 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer St. Mary's Hospital	Occupation Chief Financial Officer	1
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Michael S Eesley		Date of Receipt
Mailing Address 385 Millennium Drive		09 / 29 / 2008
City	State Zip Code	Transaction ID: 15974651
Crystal Lake	IL 60012-3761	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Centegra Health System	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Mr. Forrest G Hester		Date of Receipt
Mailing Address Post Office Box 569		09 / 29 / 2008
City	State Zip Code	Transaction ID: 15976899
Lincoln FEC ID number of contributing federal political committee.	IL 62656-0569	Amount of Each Receipt this Period 250.00
Name of Employer Abraham Lincoln Memorial Hospital	Occupation President and Chief Executive Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	650.00	
SUBTOTAL of Receipts This Page (optional)		1750.00
TOTAL This Period (last page this line number	<u> </u>	

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 71 / 149 (check only one) X
Any information copied from such Repo or for commercial purposes, other than	rts and Statements may not be sold or used by any persousing the name and address of any political committee to	
NAME OF COMMITTEE (In Full) American Hospital Association	PAC	
Full Name (Last, First, Middle Initial) Mr. Richard S Kowalski		Date of Receipt
Mailing Address 3333 North Ser	minary Street	09 / 29 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 15976900
Galesburg	IL 61401-1299	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer OSF St. Mary Medical Cent- er	Occupation Chief Executive Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) E.J. Kuiper		Date of Receipt
Mailing Address 4001 Stoneled	ge Court	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 15976901
Godfrey	IL 62035-1160	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Saint Anthony's Health Ce- nter	Occupation Chief Operating Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify)	250.00	
Full Name (Last, First, Middle Initial) Dr. James Leonard, , M.D.	L	Date of Receipt
Mailing Address 611 West Park	Street	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 15976902
Urbana	IL 61801-2500	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Carle Foundation Hospital	Occupation President and Chief Executive Officer	
Receipt For:	Aggregate Year-to-Date ▼	7
Primary General Other (specify) ▼	650.00	
CURTOTAL of Possints This Poss /or	otional)	1000.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate sch for each category Detailed Summar	of the y Page X 11a 11b 11c 12
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used a name and address of any political	by any person for the purpose of soliciting contributions committee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC	, , ,	
Full Name (Last, First, Middle Initial)		
Ms. Angela McAuley		Date of Receipt
Mailing Address 1301 Winston Circle		09 29 2008
City	State Zip Code	Transaction ID: 15976903
Woodstock	IL 60098-3678	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Centegra Hospital - Woods-	Occupation	
tock Receipt For:	Senior Vice President, Wo	men's Health
Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼		250.00
Full Name (Last, First, Middle Initial) Mr. James M Moore	1	Date of Receipt
Mailing Address 800 NE Glen Oak Ave	nue	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 15976904
<u>Peoria</u>	IL 61603-3255	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer OSF Healthcare System	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	500.00
Full Name (Last, First, Middle Initial) Doug Rahn	L	Date of Receipt
Mailing Address 701 North First Street		09 29 2008
City	State Zip Code	Transaction ID: 15976911
<u>Springfield</u>	IL 62781-0001	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Memorial Health System	Occupation Chief Operating Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼		250.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 73 / 149 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any perse e name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Robert Rosenberger Mailing Address 32 Rock River Court City Naperville FEC ID number of contributing federal political committee. Name of Employer Centegra Hospital - Woodstock Receipt For:	State Zip Code IL 60565-6347 C Occupation Chief Financial Officer	Date of Receipt M M M / D D / Y Y Y Y Y O 9 / 2 9 / 2 0 0 8 Transaction ID: 15976912 Amount of Each Receipt this Period 350.00
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Lee Sacks, , M.D.	Aggregate Year-to-Date ▼ 350.00	Date of Receipt
Mailing Address 2025 Windsor Drive	Ctata 7:a Cada	0 9 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Oak Brook	State Zip Code IL 60523-1586	Transaction ID: 15976914 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Advocate Health Care	Occupation Executive Vice President and Chief N	Леф
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Ms. Connie L Schroeder		Date of Receipt
Mailing Address 640 West Washington		09 29 2008
City Pittsfield	State Zip Code IL 62363-1350	Transaction ID: 15976915 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C 02303-1330	250.00
Name of Employer Illini Community Hospital	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	
	•	

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE /4/149 (check only one)
Any information copied from such Reports and or for commercial purposes, other than using t	d Statements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		· · · · · · · · · · · · · · · · · · ·	
Full Name (Last, First, Middle Initial) Mr. Jason Sciarro			Date of Receipt
Mailing Address 14255 Castlebar Tra	uil		09 29 2008
City Woodstock	State IL	Zip Code 60098-8881	Transaction ID: 15976916 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	00000 0001	500.00
Name of Employer Centegra Hospital - Woods- tock	Occupation Executive	n e Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Aaron T. Shepley			Date of Receipt
Mailing Address 385 Millennium Drive	е		0 9 2 9 2 0 0 8
City Crystal Lake	State IL	Zip Code 60012-3740	Transaction ID: 15976918
FEC ID number of contributing federal political committee.	C	00012-3740	Amount of Each Receipt this Period 250.00
Name of Employer Centegra Health System	Occupation Chief Qu	n ality Officer/General Counse	-
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Darryl L Vandervort			Date of Receipt
Mailing Address 403 East First Street	t		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 15976921
<u>Dixon</u> FEC ID number of contributing federal political committee.	C	61021-3187	Amount of Each Receipt this Period 500.00
Name of Employer Katherine Shaw Bethea Hos- pital		t and Chief Executive Office	r
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00]
SUBTOTAL of Receipts This Page (optional)			1250.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 75 / 149 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	statements may not be sold or used by any person ename and address of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Mark F. Weber, FACHE Mailing Address P O Box 340 City Alton FEC ID number of contributing federal political committee. Name of Employer Saint Anthony's Health Center Receipt For: Primary General Other (specify)	State Zip Code IL 62002-0340 C Occupation President Aggregate Year-to-Date 1000.00	Date of Receipt M M / D D / Y Y Y Y Y 2 9 2 0 0 8 Transaction ID: 15976922 Amount of Each Receipt this Period 1000.00
Full Name (Last, First, Middle Initial) Mr. Russ D Sword, , FACHE Mailing Address P O Box 400 City Crossett FEC ID number of contributing federal political committee. Name of Employer Ashley County Medical Center Receipt For: Primary General Other (specify)	State Zip Code AR 71635-0400 C Occupation Chief Executive Officer Aggregate Year-to-Date 227.50	Date of Receipt M M M / D D / Y Y Y Y Y O 9 1 6 2 0 0 8 Transaction ID: 16021635 Amount of Each Receipt this Period 227.50
Full Name (Last, First, Middle Initial) Joe D Walls Mailing Address 255 Coon Creek Lane City Batesville FEC ID number of contributing federal political committee. Name of Employer Central Arkansas Hospital Receipt For: Primary General Other (specify)	State Zip Code AR 72501-8274 C Occupation Administrator Aggregate Year-to-Date 227.50	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)		1455.00

	EHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 76 / 149 (check only one) X
or fo	r information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
١	Full Name (Last, First, Middle Initial) Mr. Doug Weeks, , FACHE Mailing Address 9601 Interstate 630 Exi	it 7		Date of Receipt 0 9 1 6 2 0 0 8
	City	State	Zip Code	Transaction ID: 16021637
Ī	Little Rock FEC ID number of contributing rederal political committee.	AR C	72205-7299	Amount of Each Receipt this Period 325.00
_	Name of Employer Baptist Health Receipt For: Primary General Other (specify)	. '	President & Administrator President & Francisco President & Administrator President & Administrator President & Administrator President & Administrator	
	Full Name (Last, First, Middle Initial) Ms. Elisa White Mailing Address 419 Natural Resources	s Drive		Date of Receipt
-	City	State	Zip Code	0 9 1 6 2 0 0 8 Transaction ID: 16021639
_	Little Rock	AR	72205-1576	Amount of Each Receipt this Period
	FEC ID number of contributing ederal political committee.	C		325.00
	Name of Employer Arkansas Hospital Associa- tion		sident & General Counsel	
!	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 325.00	
	Full Name (Last, First, Middle Initial) Ms. Mary C. Mayhew			Date of Receipt
ı	Mailing Address 150 Capitol Street			0 9 0 4 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 16023701
_	Augusta	ME	04330-6858	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Maine Hospital Association	Occupation Vice Pres	n sident, Government Affairs	
Ī	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
su	BTOTAL of Receipts This Page (optional)			1150.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 77 / 149 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Ar	ny information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may r name and addre	not be sold or used by any perso ess of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	Full Name (Last, First, Middle Initial) Mr. Richard Petersen Mailing Address 120 Fickett Street			Date of Receipt
	City	State	Zip Code	0 9 0 4 2 0 0 8 Transaction ID: 16023705
	South Portland	ME	04106-6874	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Maine Medical Center	Occupation Chief Oper	rating Officer	
	Receipt For: Primary General Other (specify) ▼	. '	/ear-to-Date ▼ 250.00	
 s.	Full Name (Last, First, Middle Initial) Ms. Katie Vaughan			Date of Receipt
	Mailing Address 506A East Howell Avenue			09 / 30 / 2008
	City	State	Zip Code	Transaction ID: PR1034595121264
	Alexandria	VA	22301-1216	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		40.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Associate	Director	
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	/ear-to-Date ▼ 400.00	P/R Deduction (\$20.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Melinda Reid Hatton	I		Date of Receipt
	Mailing Address 325 Seventh Street, NV Suite 700	W		09 30 7 2008
	City	State	Zip Code	Transaction ID: PR1045726221264
	Washington	DC	20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		78.00
	Name of Employer American Hospital Associa- tion-Washingt		f Washington Counsel	
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	/ear-to-Date ▼ 780.00	P/R Deduction (\$39.00 Bi- Weekly)
s	UBTOTAL of Receipts This Page (optional)			368.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	for each o		FOR LINE NUMBER: PAGE 78 / 149 (check only one) X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	atements may not be sold name and address of any	or used by any person to solitical committee to so	for the purpose of soliciting contributions plicit contributions from such committee.
American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Ms. Barbara Jellen			Date of Receipt
Mailing Address 325 Seventh Street, NV Suite 700			09 / 30 / 4 2008
City	State Zip Cod DC 20004-:		Transaction ID: PR1113464221264
Washington FEC ID number of contributing federal political committee.	DC 20004-	2818	Amount of Each Receipt this Period 28.00
Name of Employer American Hospital Associa-	Occupation Section Director		
tion-Washingt Receipt For:	Aggregate Year-to-Date	e ▼	
Primary General Other (specify) ▼		280.00	P/R Deduction (\$14.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Mr. Davon Gray			Date of Receipt
Mailing Address 325 Seventh Street, NV Suite 700	V		09 30 7 2008
City	State Zip Cod		Transaction ID: PR1143013021264
Washington	DC 20004-	2818	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		28.78
Name of Employer American Hospital Associa- tion-Washingt	Occupation Legislative Assistan	t	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date	263.95	P/R Deduction (\$14.39 Bi- Weekly)
Full Name (Last, First, Middle Initial) Ms. Erin O'Malley			Date of Receipt
Mailing Address 325 Seventh Street, NV Suite 700	V		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Cod		Transaction ID: PR1222125721264
Washington	DC 20004-	2818	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		38.90
Name of Employer American Hospital Associa- tion-Washingt	Occupation Project Manager	T	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date	233.40	P/R Deduction (\$19.45 Bi- Weekly)
SUBTOTAL of Receipts This Page (optional)			95.68

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 79 / 149 (check only one) X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. David L. Allen		Date of Receipt
Mailing Address 325 Seventh Street, N		09 / 30 / 4 2008
City	State Zip Code	Transaction ID: PR1234662821264
Washington	DC 20004-2818	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	28.00
Name of Employer American Hospital Associa- tion-Washingt	Occupation Associate Director, Media Relations	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	280.00	P/R Deduction (\$14.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Ms. Mary Meadows	<u> </u>	Date of Receipt
Mailing Address One North Franklin		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: PR1260472921264
Chicago	IL 60606-3436	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	28.00
Name of Employer American Organization of Nurse Executi	Occupation Director of Professional Practice	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	280.00	P/R Deduction (\$14.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Ms. Michelle Marie Mathy		Date of Receipt
Mailing Address 1660 Lanier PL Apt. 4		09 / 30 / 2008
City	State Zip Code	Transaction ID: PR1300853721264
Washington	DC 20009-2938	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	28.00
Name of Employer American Hospital Associa- tion-Washingt	Occupation Project Manager/PAC Coordinator	
Receipt For:	Aggregate Year-to-Date ▼	_
Primary General Other (specify) ▼	280.00	P/R Deduction (\$14.00 Bi- Weekly)
SUBTOTAL of Receipts This Page (optional)		84.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 80 / 149 (check only one) X 11a 11b 11c 12 13 14 15 16 11
A	ny information copied from such Reports and S r for commercial purposes, other than using the	tatements may not be sold or used by any person name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Mr. Alex White, Jr.		Date of Receipt
	Mailing Address One North Franklin		09 / 30 / 2008
	City Chicago	State Zip Code IL 60606-3436	Transaction ID: PR1339349921264 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	116.00
	Name of Employer American Hospital Associa- tion	Occupation Account Executive	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	1160.00	P/R Deduction (\$58.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Frances Margolin		Date of Receipt
	Mailing Address One North Franklin		09 30 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: PR1347702721264
	Chicago	IL 60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Vice President, Operatinos HRET	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	400.00	P/R Deduction (\$20.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Mr. James Wadzinski		Date of Receipt
	Mailing Address One North Franklin		09 30 YYYY 2008
	City	State Zip Code	Transaction ID: PR1347703421264
	Chicago	IL 60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation VP, Operations and Account Services	
	Receipt For: Primary General	Aggregate Year-to-Date ▼	P/R Deduction (\$20.00 Bi-
	Other (specify) ▼	400.00	Weekly)
	OUDTOTAL of December This December (authors)		196.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 81 / 149 (check only one) X
	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Z	Full Name (Last, First, Middle Initial)		Policid Position
	Mr. Jack A. Mackay Mailing Address One North Franklin		Date of Receipt M M
	City Chicago	State Zip Code IL 60606-3436	Transaction ID: PR1347703621264
	FEC ID number of contributing federal political committee.	C 60000-3430	Amount of Each Receipt this Period 40.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Vice President & CIO	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	P/R Deduction (\$20.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Catherine D. Sewell		Date of Receipt
	Mailing Address One North Franklin		09 30 YYYY 09 30 2008
	City	State Zip Code	Transaction ID: PR1347708421264
	Chicago	IL 60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	106.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Executive Director	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	689.00	P/R Deduction (\$53.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Susan Gergely		Date of Receipt
	Mailing Address One North Franklin		09 30 2008
	City	State Zip Code	Transaction ID: PR1347791021264
	Chicago	IL 60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	28.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Director of Operations, AONE	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 280.00	P/R Deduction (\$14.00 Bi- Weekly)
	SUBTOTAL of Receipts This Page (optional)		174.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	,	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 82/149 (check only one)
Any information copied from such Reports and or for commercial purposes, other than using	d Statements may	y not be sold or used by any perso	on for the purpose of soliciting contributions
	ine name and add	aress of any political committee to	Solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Mr. John Slotman			Date of Receipt
Mailing Address 325 Seventh Street, Suite 700	NW		09 30 7 9 9
City	State	Zip Code	Transaction ID: PR1384065321264
Washington	DC	20004-2802	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		40.00
Name of Employer American Hospital Associa- tion-Washingt	Occupatio Associate	n e Director, Federal Relations	<u> </u>
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 400.00	P/R Deduction (\$20.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Ms. Stephanie H. Drake			Date of Receipt
Mailing Address One North Franklin			09 30 7 2008
City	State	Zip Code	Transaction ID: PR1492459921264
Chicago	<u> </u>	60606-3436	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		36.00
Name of Employer American Hospital Associa-	Occupatio Associate	n e Executive Director - ASHH	BA
tion-Chicago Receipt For:		e Year-to-Date ▼	· · ·
Primary General Other (specify) ▼	riggrogate	252.00	P/R Deduction (\$18.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Ms. Linda Fishman			Date of Receipt
Mailing Address 325 Seventh Street, Suite 700	NW		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: PR327629121264
Washington	DC	20004-2818	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		78.00
Name of Employer American Hospital Associa- tion-Washingt		sident Federal Relations	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	780.00	P/R Deduction (\$39.00 Bi- Weekly)
			154.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 83 / 149 (check only one) X
A	ny information copied from such Reports and S r for commercial purposes, other than using the	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
_	Full Name (Last, First, Middle Initial) Ms. Debbie F. Weiner		Date of Receipt
	Mailing Address 11004 petersborough [09 30 2008
	City	State Zip Code	Transaction ID: PR327745921264
	Rockville	MD 20852-3249	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	78.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Director, Grassroots Advocacy	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	780.00	P/R Deduction (\$39.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Mr. Michael P. McCue		Date of Receipt
	Mailing Address 122 N. Greenwood Ave	enue	09 30 2008
	City	State Zip Code	Transaction ID: PR327771621264
	Park Ridge	IL 60068-3227	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	28.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Associate Director	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	280.00	P/R Deduction (\$14.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Suzanne R. Sonik		Date of Receipt
	Mailing Address One North Franklin		09 / 09 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: PR327777221264
	Chicago	IL 60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	28.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Director, Long-Term Care	
	Receipt For:	Aggregate Year-to-Date ▼	_
	Primary General Other (specify) ▼	280.00	P/R Deduction (\$14.00 Bi- Weekly)
Γ	SUBTOTAL of Receipts This Page (optional)		134.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 84 / 149 (check only one) X 11a
A	ny information copied from such Reports and S r for commercial purposes, other than using the	tatements may not be sold or used by any per name and address of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
<u></u>	Full Name (Last, First, Middle Initial) Ms. Debra J. Stock		Date of Receipt
	Mailing Address 1022 S. Harvey Avenu	е	09 / 30 / 4 2008
	City Oak Park	State Zip Code IL 60304-2132	Transaction ID: PR327777821264 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40.00
	Name of Employer American Hospital Associa- tion-Chicago Receipt For: Primary General	Occupation Vice President, Member Relations Aggregate Year-to-Date ▼	P/R Deduction (\$20.00 Bi-
	Other (specify) ▼	400.00	Weekly)
	Full Name (Last, First, Middle Initial) Mr. Neil J. Jesuele		Date of Receipt
	Mailing Address 1003 Kimberly Place		09 / 30 / 2008
	City	State Zip Code	Transaction ID: PR327801721264
	Great Falls FEC ID number of contributing federal political committee.	VA 22066-1546	Amount of Each Receipt this Period 40.00
	Name of Employer American Hospital Associa- tion-Washinot	Occupation Executive Vice President	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	P/R Deduction (\$20.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Pamela Austin Thompson, RN, MSN		Date of Receipt
	Mailing Address 325 Seventh Street, N Suite 700	W	09 30 7 2008
	City	State Zip Code	Transaction ID: PR327812021264
	Washington FEC ID number of contributing federal political committee.	DC 20004-2818	Amount of Each Receipt this Period 78.00
	Name of Employer American Organization of Nurse Executi	Occupation Executive Director	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 780.00	P/R Deduction (\$39.00 Bi- Weekly)
Γ,	SURTOTAL of Receipts This Page (ontional)		158.00

П	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 85 / 149 (check only one) X 11a 11b 11c 12 13 14 15 16 1
A o	ny information copied from such Reports and St	atements may not be sold or used by any perso name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Ms. Joan H. Lewis		Date of Receipt
	Mailing Address 6034 North 22nd Street	t	09 30 2008
	City Arlington	State Zip Code VA 22205-3408	Transaction ID: PR327831721264 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Regional Executive	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	P/R Deduction (\$20.00 Bi- Weekly)
. –	Full Name (Last, First, Middle Initial) Mr. Robert J. Donovan Mailing Address - One North Franklin Street		Date of Receipt
	Mailing Address One North Franklin Str	09 30 2008	
	City	State Zip Code	Transaction ID: PR327846221264
	Chicago	IL 60606	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	28.00
	Name of Employer American Hospital Associa- tion-Chicago Receipt For:	Occupation Vice President, Meetings & Travel Ser Aggregate Year-to-Date ▼	rv
	Primary General Other (specify) ▼	280.00	P/R Deduction (\$14.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Ellen A. Pryga		Date of Receipt
	Mailing Address 2401 Calvert Street, NV Apt. 1008	N	09 / 30 / Y Y Y Y
	City	State Zip Code	Transaction ID: PR327851921264
	Washington	DC 20008-2614	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40.00
	Name of Employer American Hospital Associa- tion-Washingt Receipt For:	Occupation Director, Policy Development	
	Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	P/R Deduction (\$20.00 Bi- Weekly)
Γ	SUBTOTAL of Receipts This Page (optional)		108.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 86 / 149 (check only one) X 11a
Ar	for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	atements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
\angle	American Hospital Association PAC Full Name (Last, First, Middle Initial)		1
•	Mr. Mark Seklecki Mailing Address 325 Seventh Street, NV	V	Date of Receipt
	Suite 700		09 30 2008
	City	State Zip Code	Transaction ID: PR327858021264
	Washington	DC 20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	78.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Vice President, Political Affairs	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	780.00	P/R Deduction (\$39.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Mr. John F. Barry		Date of Receipt
	Mailing Address One North Franklin		09 30 7 2008
	City	State Zip Code	Transaction ID: PR327877821264
	Millis	MA 60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	78.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Regional Executive	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	780.00	P/R Deduction (\$39.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Mr. George F. Bergstrom		Date of Receipt
	Mailing Address 130 North Garland Cou #3002		09 / 30 / 4 2008
	City	State Zip Code	Transaction ID: PR327895721264
	Chicago	IL 60602-4750	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Vice President	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	P/R Deduction (\$20.00 Bi- Weekly)
	UBTOTAL of Receipts This Page (optional)		196.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 87 / 149 (check only one) X
4	ny information copied from such Reports and St r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	atements may not be sold or used by any personame and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Ms. Judy Williams		Date of Receipt
	Mailing Address One North Franklin Str		09 / 30 / 2008
	City Chicago	State Zip Code IL 60606	Transaction ID: PR327918921264
	FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 34.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Director, Membership Admin.	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 255.00	P/R Deduction (\$17.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Mr. Richard J Umbdenstock		Date of Receipt
	Mailing Address 325 Seventh Street, NV Suite 700	09 / 30 / Y Y Y Y Y	
	City	State Zip Code DC 20004-2818	Transaction ID: PR328132821264
	Washington FEC ID number of contributing federal political committee.	DC 20004-2818	Amount of Each Receipt this Period 78.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation President	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 780.00	P/R Deduction (\$39.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Barbara Lorsbach		Date of Receipt
	Mailing Address 204 7th Ave		09 / 30 / 2008
	City	State Zip Code	Transaction ID: PR328136921264
	La Grange FEC ID number of contributing federal political committee.	IL 60525-6406	Amount of Each Receipt this Period 78.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Sr. Vice President, Member Relations	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 780.00	P/R Deduction (\$39.00 Bi- Weekly)
	SUBTOTAL of Receipts This Page (optional)		190.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 88 / 149 (check only one) X
A 0	ny information copied from such Reports and S r for commercial purposes, other than using the	Statements may not be sold or used by any per e name and address of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
<u></u>	Full Name (Last, First, Middle Initial) Ms. Lauren A. Barnett		Date of Receipt
	Mailing Address One North Franklin St	reet	09 / 30 / Y Y Y Y Y
	City Chicago	State Zip Code IL 60606	Transaction ID: PR328174921264 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	36.00
	Name of Employer American Hospital Associa- tion-Chicago Receipt For: Primary General Other (specify) ▼	Occupation Executive Director, SHSMD Aggregate Year-to-Date 252.00	P/R Deduction (\$18.00 Bi-Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Donna J. Melkonian		Date of Receipt
	Mailing Address 5545 North Wayne		09 / 30 / Y Y Y Y Y
	City	State Zip Code	Transaction ID: PR328223821264
	Chicago FEC ID number of contributing federal political committee.	IL 60640-1318	Amount of Each Receipt this Period 78.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Vice President	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 780.00	P/R Deduction (\$39.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Dr. James D. Bentley, Ph.D.		Date of Receipt
	Mailing Address 13106 Vingle Lane		09 30 YYYYY 2008
	City	State Zip Code	Transaction ID: PR328224921264
	Silver Spring	MD 20906	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	78.00
	Name of Employer American Hospital Associa- tion-Washingt Receipt For:	Occupation Sr. Vice President	
	Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 780.00	P/R Deduction (\$39.00 Bi- Weekly)
Γ	SUBTOTAL of Receipts This Page (optional) .		192.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 89 / 149 (check only one) X 11a 11b 11c 12 13 14 15 16 11
A 0	ny information copied from such Reports and S r for commercial purposes, other than using the	Statements may e name and add	not be sold or used by any persidress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
	Full Name (Last, First, Middle Initial) Mr. Ron O. Purcell			Date of Receipt
	Mailing Address 1093 N. Faldo Way			09 / 30 / 4 9 9
	City	State	Zip Code	Transaction ID: PR328241421264
	Eagle	ID	83616-5369	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		40.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Regional	n Executive	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	400.00	P/R Deduction (\$20.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Mr. Richard J. Pollack			Date of Receipt
	Mailing Address 3475 North Venice Str	09 30 YYYYY 2008		
	City	State	Zip Code	Transaction ID: PR328260921264
	Arlington	VA	22207-4446	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		78.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Executive	n e Vice President	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		780.00	P/R Deduction (\$39.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Mr. Richard H. Wade			Date of Receipt
	Mailing Address 1221 Cavalier Road			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: PR328310421264
	Arnold	MD	21012-2126	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		80.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Sr. Vice I	n President, Communications	
	Receipt For:	Aggregate	Year-to-Date ▼	_
	Primary General Other (specify) ▼		800.00	P/R Deduction (\$40.00 Bi- Weekly)
Γ		1	1	198.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 90 / 149 (check only one) X 11a
A	ny information copied from such Reports and r for commercial purposes, other than using th	Statements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
<u></u>	Full Name (Last, First, Middle Initial) Mr. Steve M. Ahnen			Date of Receipt
	Mailing Address 125 Airport Road			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: PR328312721264
	Concord	NH	03301-7300	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		78.00
	Name of Employer American Hospital Associa-	Occupation Senior Vi	n ice President	
	tion-Washingt Receipt For:		Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	780.00	P/R Deduction (\$220.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Lori M. Schor			Date of Receipt
	Mailing Address 325 Seventh Street, N Suite 700	١W		09 30 7 9 9 9
	City	State	Zip Code	Transaction ID: PR328341821264
	Washington	DC	20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		78.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Director,	n Political Action & Grassroot	
	Receipt For:	_ '	Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	780.00	P/R Deduction (\$39.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Carla L. Luggiero			Date of Receipt
	Mailing Address 325 Seventh Street, N Suite 700	١W		0 9 3 0 Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: PR328490121264
	Washington	DC	20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		19.24
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Sr. Assoc	n ciate Director	
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	292.40	P/R Deduction (\$9.62 Bi-W-eekly)
_	SUBTOTAL of Receipts This Page (optional) .			175.24

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 91 / 149 (check only one) X 11a 11b 11c 12 13 14 15 16
Ar	ny information copied from such Reports and S for commercial purposes, other than using the	Statements may e name and add	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full)		, p	
	American Hospital Association PAC			
_	Full Name (Last, First, Middle Initial) Ms. Carolyn Forcina			Date of Receipt
	Mailing Address 200 Clover Hill Court			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: PR328511821264
	Yardley	PA	19067-5736	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		78.00
	Name of Employer American Hospital Associa-	Occupatio	n Executive	
	tion-Chicago Receipt For:	- 	Year-to-Date ▼	-
	Primary General	Aggregate		P/R Deduction (\$39.00 Bi-
	Other (specify) ▼	0 0	780.00	Weekly)
	Full Name (Last, First, Middle Initial) Ms. Alicia N. Mitchell			Date of Receipt
	Mailing Address 1501 N. Harrison Street	et		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: PR328512021264
	Arlington	VA	22205-2726	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		40.00
	Name of Employer American Hospital Associa-	Occupatio		7
	tion-Washingt Receipt For:	. '	sident, Media Relations	_
	Primary General	Aggregate	e Year-to-Date ▼	D/D D = du = ti = = (\$00.00 B)
	Other (specify) ▼		400.00	P/R Deduction (\$20.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial)			Data of Danairs
	Ms. Rebecca Chickey Mailing Address One North Franklin Sti	root		Date of Receipt
	Maining Address Offic North Franklin Sti	i eet		09 30 2008
	City	State	Zip Code	Transaction ID: PR329013421264
	Chicago	IL	60606	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		40.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupatio Director,	n Psychiatric and Substance A	Ab
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		400.00	P/R Deduction (\$20.00 Bi- Weekly)
				158.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 92 / 149 (check only one) X 11a 11b 11c 12 13 14 15 16 11
0	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any perso name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
۷.	Full Name (Last, First, Middle Initial) Dr. John R. Combes, MD		Date of Receipt
	Mailing Address 1 North Franklin SAtre		09 30 2008
	City Chicago	State Zip Code IL 60614	Transaction ID: PR329071321264 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	78.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation President & COO, Leadership & Busin	ness
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 780.00	P/R Deduction (\$39.00 Bi- Weekly)
. –	Full Name (Last, First, Middle Initial) Ms. Robyn Cooke		Date of Receipt
	Mailing Address 325 Seventh Street, N Suite 700	N	09 / 30 / 4 / 4 / 4 / 4 / 4 / 4 / 4 / 4 / 4 /
	City Washington	State Zip Code DC 20004-2818	Transaction ID: PR329084421264
	FEC ID number of contributing federal political committee.	DC 20004-2818	Amount of Each Receipt this Period 40.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Senior Associate Director Executive E	3r
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 400.00	P/R Deduction (\$20.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Mr. W. Thomas Deweese		Date of Receipt
	Mailing Address 500 Interstate Bouleva	rd South	09 / 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: PR329215721264
	Nashville FEC ID number of contributing federal political committee.	TN 37210-4634	Amount of Each Receipt this Period 78.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Regional Executive	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 780.00	P/R Deduction (\$39.00 Bi- Weekly)
	SUBTOTAL of Receipts This Page (optional)		196.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 93 / 149 (check only one) X
Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. John Evans		Date of Receipt
Mailing Address One North Franklin Str	eet	0 9 3 0 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: PR329342621264
Chicago	IL 60606	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	28.00
Name of Employer American Hospital Associa- tion-Chicago	Occupation CFO	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	280.00	P/R Deduction (\$14.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Ms. Audrey L. Harris		Date of Receipt
Mailing Address 1136 W. Farwell Ave.		09 30 2008
City	State Zip Code	Transaction ID: PR329654221264
Chicago	IL 60626-3861	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	28.00
Name of Employer American Hospital Associa- tion-Chicago	Occupation Executive Director, ASDVS	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	280.00	P/R Deduction (\$14.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Ms. Patricia Meersman		Date of Receipt
Mailing Address One North Franklin		0 9 3 0 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: PR330343321264
Chicago	IL 60606-3436	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer American Hospital Associa- tion-Chicago	Occupation Executive Services Director	
Receipt For:	Aggregate Year-to-Date ▼	
Primary ☐ General Other (specify) ▼	400.00	P/R Deduction (\$20.00 Bi- Weekly)
SUBTOTAL of Receipts This Page (optional)		96.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 94 / 149 (check only one) X 11a 11b 11c 12 13 14 15 16
A C	ny information copied from such Reports and S r for commercial purposes, other than using the	atements may not be sold or used by any pers name and address of any political committee to	son for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
_	Full Name (Last, First, Middle Initial) Mr. Thomas Misfeldt		Date of Receipt
	Mailing Address One North Franklin		09 / 30 / 2008
	City	State Zip Code	Transaction ID: PR330411621264
	Chicago	IL 60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Associate Regional Executive	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	400.00	P/R Deduction (\$20.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Maureen D. Mudron		Date of Receipt
	Mailing Address 325 Seventh Street, NV Suite 700	V	09 30 7 2008
	City	State Zip Code	Transaction ID: PR330465221264
	Washington	DC 20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	28.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Asst. General Counsel	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	266.00	P/R Deduction (\$14.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Mr. Paul N. Muraca		Date of Receipt
	Mailing Address 4960 138th Cricle Wes	t	09 30 7 2008
	City	State Zip Code	Transaction ID: PR330475421264
	Apple Valley	MN 55124	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	78.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Regional Executive	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	780.00	P/R Deduction (\$39.00 Bi- Weekly)
	DUDTOTAL of Descript This Description		146.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 95 / 149 (check only one) X 11a 11b 11c 12 13 14 15 16
Ar	ny information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	atements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Z	Full Name (Last, First, Middle Initial) Ms. Jennifer E. Mallard		Date of Receipt
	Mailing Address 6109 North 9th Road		09 30 2008
	City Arlington	State Zip Code VA 22205-1609	Transaction ID: PR330534321264 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Sr. Associate Director	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	P/R Deduction (\$20.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Mr. Gene O'Dell		Date of Receipt
	Mailing Address One North Franklin		09 30 YYYY 2008
	City	State Zip Code	Transaction ID: PR330547721264
	Chicago	IL 60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Vice President, Strategic Planning	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	P/R Deduction (\$20.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Eileen O'Keefe		Date of Receipt
	Mailing Address 172 Atteridge		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: PR330549221264
	<u>Lake Forest</u>	IL 60045-1715	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Vice President, Member Relations	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	P/R Deduction (\$20.00 Bi- Weekly)
s	UBTOTAL of Receipts This Page (optional)		120.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate sched for each category of Detailed Summary P	the (crieck only only)
A 0	ny information copied from such Reports and S r for commercial purposes, other than using the	atements may not be sold or used by name and address of any political cor	any person for the purpose of soliciting contributions nmittee to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
۷.	Full Name (Last, First, Middle Initial) Mr. Walter J. Reiter		Date of Receipt
	Mailing Address 325 Seventh Street, NV Suite 700		09 / 30 / Y Y Y Y Y Y Y
	City Washington	State Zip Code DC 20004-2818	Transaction ID: PR330776121264 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation V.P., Advocacy & Member Co	ommunications
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	0.00 P/R Deduction (\$20.00 Bi-Weekly)
. –	Full Name (Last, First, Middle Initial) Ms. Debi H. Tucker, Esq.		Date of Receipt
	Mailing Address 1101 N. Kentucky Stre	et	09 / 30 / 2008
	City	State Zip Code	Transaction ID: PR331278821264
	Arlington FEC ID number of contributing federal political committee.	VA 22205-3515	Amount of Each Receipt this Period 28.00
	Name of Employer American Hospital Associa- tion-Washinot	Occupation Director, State Issues Forum	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼	0.00 P/R Deduction (\$14.00 Bi-Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Darlene S. Vanderbush		Date of Receipt
	Mailing Address 26 West Glendale Ave		09 30 2008
	City	State Zip Code	Transaction ID: PR331304221264
	Alexandria FEC ID number of contributing federal political committee.	VA 22301-2402	Amount of Each Receipt this Period 40.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Director Advocacy and Public	c Policy Op
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	P/R Deduction (\$20.00 Bi- Weekly)
	SUBTOTAL of Receipts This Page (optional)		108.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 97 / 149 (check only one) X 11a 11b 11c 12 13 14 15 16
Ar	y information copied from such Reports and S for commercial purposes, other than using the	Statements may e name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full)			
	American Hospital Association PAC			
_	Full Name (Last, First, Middle Initial) Ms. Jo Ann Webb			Date of Receipt
	Mailing Address 325 Seventh Street, NV Suite 700	W		09 09 2008
	City	State	Zip Code	Transaction ID: PR331379121264
	Washington	DC	20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		28.00
	Name of Employer American Organization of	Occupation	n Federal Relations & Policy	
	Nurse Executi Receipt For:	, '	Year-to-Date ▼	
	Primary General Other (specify) ▼	, iggrogate	280.00	P/R Deduction (\$14.00 Bi-Weekly)
	Full Name (Last, First, Middle Initial)			
	Ms. Judy Weinsheimer			Date of Receipt
	Mailing Address 325 Seventh Street, NV Suite 700	W		09 / 30 / Y Y Y Y Y
	City	State	Zip Code	Transaction ID: PR331386921264
	Washington	DC	20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		28.76
	Name of Employer American Hospital Associa-	Occupation	n	
	tion-Washingt	Senior A	ssociate Director	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		263.80	P/R Deduction (\$14.38 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Mr. Alexander R. White, Sr.	<u> </u>		Date of Receipt
	Mailing Address PO Box 15587			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: PR331416021264
	Austin	TX	78761-5587	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		116.00
	Name of Employer American Hospital Associa- tion	Occupation Regional	n Executive	
	Receipt For:	, ' 	e Year-to-Date ▼	
	Primary General Other (specify) ▼		1160.00	P/R Deduction (\$58.00 Bi- Weekly)
	UBTOTAL of Receipts This Page (optional)	<u> </u>		172.76

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 98 / 149 (check only one) X 11a 11b 11c 12 13 14 15 16
Ai	ny information copied from such Reports and S for commercial purposes, other than using the	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full)	,,,	
	American Hospital Association PAC		
_	Full Name (Last, First, Middle Initial) Mr. Donald May		Date of Receipt
	Mailing Address 521 Great Falls St.		09 30 2008
	City	State Zip Code	Transaction ID: PR331533221264
	Falls Church	VA 22046-2613	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	78.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Vice President, Policy	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	780.00	P/R Deduction (\$39.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Elizabeth Summy		Date of Receipt
	Mailing Address One North Franklin		09 / 09 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: PR346168121264
	Chicago	IL 60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	28.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Executive Director, ASHRM	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify)	280.00	P/R Deduction (\$14.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Kristin Welsh		Date of Receipt
	Mailing Address 325 Seventh Street, N' Suite 700	W	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: PR517619721264
	Washington	DC 20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	78.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Vice President Executive Branch Rela	ati
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	780.00	P/R Deduction (\$39.00 Bi- Weekly)
	SUBTOTAL of Receipts This Page (optional)	<u> </u>	184.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 99 / 149 (check only one) X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any person e name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Carlos Jackson		Date of Receipt
Mailing Address 325 Seventh Street, N	W	09 30 7 2008
City	State Zip Code	Transaction ID: PR566280921264
Washington	DC 20004-2802	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	47.62
Name of Employer American Hospital Associa- tion-Washingt	Occupation Associate Director, Federal Relations	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	357.15	P/R Deduction (\$23.81 Bi- Weekly)
Full Name (Last, First, Middle Initial) Ms. Ashley B. Thompson		Date of Receipt
Mailing Address 606 S. Royal St.		09 30 7 2008
City	State Zip Code	Transaction ID: PR766023721264
Alexandria	VA 22314-4142	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer American Hospital Associa- tion-Washingt	Occupation Senior Associate Director, Policy	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	400.00	P/R Deduction (\$20.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Ms. Rochelle M. Archuleta		Date of Receipt
Mailing Address 325 Seventh Street, N Suite 700	W	09 30 7 2008
City	State Zip Code	Transaction ID: PR801366321264
Washington	DC 20004-2818	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	28.00
Name of Employer American Hospital Associa- tion-Washingt	Occupation Senior Associate Dir. Policy Develop	me
Receipt For:	Aggregate Year-to-Date ▼	_
Primary General Other (specify) ▼	280.00	P/R Deduction (\$14.00 Bi- Weekly)
CURTOTAL of Descripts This Descriptions)		115.62

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 100 / 149 (check only one) X 11a 11b 11c 12 13 14 15 16			
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any persor he name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.			
Full Name (Last, First, Middle Initial) Ms. Lisa Kidder Hrobsky		Date of Receipt			
Mailing Address 325 Seventh Street, Suite 700		09 30 2008			
City <u>Washington</u>	State Zip Code DC 20004-2818	Transaction ID: PR876637221264 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	28.00			
Name of Employer American Hospital Association-Washingt Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Senior Associate Director Aggregate Year-to-Date 280.00	P/R Deduction (\$14.00 Bi- Weekly)			
Full Name (Last, First, Middle Initial) Ms. Sheila R. Meadows		Date of Receipt			
Mailing Address 325 Seventh Street, Suite 700	NW	09			
City	State Zip Code	Transaction ID: PR936292321264			
Washington FEC ID number of contributing federal political committee.	DC 20004-2818	Amount of Each Receipt this Period 28.00			
Name of Employer American Hospital Association-Washingt Receipt For: Primary General	Occupation Director of Operations Aggregate Year-to-Date				
Other (specify)	280.00	P/R Deduction (\$14.00 Bi- Weekly)			
Full Name (Last, First, Middle Initial) Mr. David A. Strickland		Date of Receipt			
Mailing Address One N. Franklin Stre	Mailing Address One N. Franklin Street				
City	State Zip Code	Transaction ID: PR939603921264			
Chicago	IL 60606	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	28.00			
Name of Employer American Organization of Nurse Executi	Occupation Director of Operations				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00	P/R Deduction (\$14.00 Bi- Weekly)			
SUBTOTAL of Receipts This Page (optional)		84.00			
TOTAL This Period (last page this line numb		77569.27			

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 101 / 149 (check only one) 11a 11b 11c X 12 13 14 15 16
Any information copied from such Reports and Si or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) New York Hospital & Healthcare Assoc. FED PAC Mailing Address One Empire Drive City Rensselaer FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)	State Zip Code NY 12144 C C00160259 Occupation Aggregate Year-to-Date 60000.00	Date of Receipt M M M O D D O O O O O O O O O O O O O O
Full Name (Last, First, Middle Initial) AZHHA Political Action Committee (Federal) Mailing Address 2901 North Central Ave Suite 900 City Phoenix FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)	State Zip Code AZ 85012 C C00217687 Occupation Aggregate Year-to-Date 13900.00	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) New York Hospital & Healthcare Assoc. FED PAC Mailing Address One Empire Drive City Rensselaer FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)	State Zip Code NY 12144 C C00160259 Occupation Aggregate Year-to-Date 80000.00	Date of Receipt M M M O 9 O 9 2 0 0 8 Transaction ID: 15882004 Amount of Each Receipt this Period 20000.00
SUBTOTAL of Receipts This Page (optional)		68900.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 102 / 149 (check only one) 11a 11b 11c X 12 13 14 15 16 11
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Texas Hospital Association HOSPAC - Federal Mailing Address P.O. Box 15587 City Austin FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)	State Zip Code TX 78761-5587 C C00301325 Occupation Aggregate Year-to-Date ▼ 63000.00	Date of Receipt M M M / D D / Y Y Y Y Y 2 0 0 8 Transaction ID: 15933646 Amount of Each Receipt this Period 15000.00
Full Name (Last, First, Middle Initial) New York Hospital & Healthcare Assoc. FED PAG Mailing Address One Empire Drive City Rensselaer FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)	State Zip Code NY 12144 C C00160259 Occupation Aggregate Year-to-Date 120000.00	Date of Receipt M M M / D D / 26 / 2008 Transaction ID: 15943745 Amount of Each Receipt this Period 40000.00
Full Name (Last, First, Middle Initial) Health Alliance of PA PAC - Federal Mailing Address Post Office Box 8600 City Harrisburg FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)	State Zip Code PA 17105-8600 C C00128082 Occupation Aggregate Year-to-Date 70000.00	Date of Receipt M M O 9 O 9 O 9 O 9 O 0 8 Transaction ID: 15989081 Amount of Each Receipt this Period 10000.00
SUBTOTAL of Receipts This Page (optional)		65000.00
TOTAL This Period (last page this line number	only)	133900.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			FOR LINE NUMBER: PAGE 103 / 149											
		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) 11a 11b 11c 12 13 14 15 X 16 17											
Ar or	ny information copied from such Reports and Statements ma for commercial purposes, other than using the name and ad	ly not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.											
$\overline{\ \ }$	NAME OF COMMITTEE (In Full)													
\rangle	American Hospital Association PAC													
	Full Name (Last, First, Middle Initial) Reynolds For Congress		Date of Receipt											
	Mailing Address PO Box 15388 Pittsford		09 / 15 / Y Y Y Y Y											
	City State	Zip Code	Transaction ID: 15885470											
	Rochester NY	14615	Amount of Each Receipt this Period											
	FEC ID number of contributing federal political committee.	0336065	2000.00											
	Name of Employer Occupation	on												
	Receipt For: 2008 Aggregat X Primary General Other (specify)	e Year-to-Date ▼ 2000.00												

SUBTOTAL of Receipts This Page (optional)	•	2000.00
TOTAL This Period (last page this line number only)	<u> </u>	2000.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 104 / 149 (check only one) 11a 11b 11c 12 13 14 15 16 17 17
	d Statements may not be sold or used by any pers the name and address of any political committee t	
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Citibank, F.S.B. Mailing Address 1400 G Street, NW City	State Zip Code	Date of Receipt M M D D Y Y Y Y Y Y Y Y
Washington	DC 20005	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer	Occupation	481.12
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 4266.59	Interest

SUBTOTAL of Receipts This Page (optional)	•	481.12
TOTAL This Period (last page this line number only)	•	481.12

SCHEDULE B (FEC Form (ITEMIZED DISBURSEMEN)		/ Use separate schedule(FOR LIN (check or			IE NUMBER: PAGE 105 / 149 nly one)							
CIVIIZED D			Summary Page	_ F	2 2	1b 7	22 28a	X	23 28l	<u> </u>	24 28c	F	25 29		
	oied from such Reports and Surposes, other than using the													;	
NAME OF CON	MMITTEE (In Full)														
American Hos	spital Association PAC														
	r, First, Middle Initial) or a Progressive Congres	SS					Tran Date				1588 nent	3325	;		
Mailing Address	555 New Jersey Ave	nue, NW, Suit	te 2				0 ^M 9	М	/	0 4		Ý Ž	ο ὁ ε	3 Y	
City Washington		State DC	Zip Code 20001				Amo	unt c	of Ea	ch [Disburs	emen	t this F	• erio	
Purpose of Disb 2008 Contribution					111		L					50	00.00)	
2008 Contribution 011 Candidate Name Category/ Committee for a Progressive Congress Type															
Office Sought:		sbursement For: Primary Other (spe	General ecify) ▼	<u>'</u>	100		2008	Co	ntrik	outi	on				
Full Name (Last, First, Middle Initial) Dave Camp For Congress 2008							Tran Date				1588 nent	3339)		
Mailing Address 5915 Eastman Ave. Suite 100							0 ^M 9	М	′	0 4	^D /	Ý Ž	0 0 8	} Y	
City Midland		State MI	Zip Code 48640				Amo	unt c	of Ea	ch [Disburs	emen	t this F	 erio	
Purpose of Disbursement Contribution						1000					00.00)			
Candidate Name Rep. David Le		Cat)11 egory	y /											
Office Sought:	X House Dis Senate President District: 04	Sbursement For: Primary Other (spe	2008 X General		<u> </u>		Contribution								
	r, First, Middle Initial)						Tran Date				1588 nent	3364	ļ		
Mailing Address P. O. Box 17813							o [™] 9	М	/	0 4	1 /	Ý Ž	0 0 8	} Y	
City Richmond		State VA	Zip Code 23226				Amo	unt c	of Ea	ch [Disburs	emen	t this F	- Perio	
	Purpose of Disbursement						L					10	00.00)	
Candidate Name Rep. Eric I. C				Cat)11 egory	y /									
Office Sought:	X House Dis Senate	Sbursement For:	2008 X General		<u> </u>		Cont	ribu	tion						
State: VA	President District: 07	Other (spe	эспу) 🔻												
	-							_	_	_				_	

	CHEDULE B (FEC Form 3X)	 Use separate schedule(s) 				NE NUMBER: PAGE 106 / 149 only one)																
_	TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	27		21b 27	Ė	22 28a	X	23 28b			24 28c	25 29		26 30l							
	ny Information copied from such Reports and Stater for commercial purposes, other than using the nam													S								
	NAME OF COMMITTEE (In Full) American Hospital Association PAC	•																				
Α.	Full Name (Last, First, Middle Initial) Goode For Congress										Transaction ID: 15883403 Date of Disbursement											
	Mailing Address 235 South Main Street	Mailing Address 235 South Main Street										$\begin{array}{c ccccccccccccccccccccccccccccccccccc$										
	City Rocky Mount	State Zip Code VA 24151				Amount of Each Disbursement this Period																
	Purpose of Disbursement Contribution		<u></u> .		•				1000.0	0												
	Candidate Name Rep. Virgil H. Goode, Jr. Office Sought: X House Disburs	ement For: 2008		ate(gory/ be																	
	Senate President	Primary X General Other (specify) ▼				(Conti	ribu	ition													
_ В.	State: VA District: 05 Full Name (Last, First, Middle Initial)										_	88404	10									
.	Davis For Congress/Friends Of Davis								Date of Disbursement 0 9 0 4 2 0 0 8													
	Mailing Address 5956 W. Race Avenue																					
	City Chicago	State Zip Code IL 60644				Amount of Each Disbursement this Period																
	Purpose of Disbursement Contribution	01	1		L.						2000.0	0										
	Candidate Name Rep. Danny K. Davis		ate(gory/ pe																		
	Office Sought: X House Senate President State: IL District: 07	ement For: 2008 Primary X General Other (specify)				Contribution																
С.	Full Name (Last, First, Middle Initial) John Hall For Congress				Date	of E	Disbur	se	ment		-											
	Mailing Address PO Box 469		099 / 04 / 2008																			
	City Beacon	State Zip Code NY 12508					Amoı	unt (of Eac	ch	Disb	urseme	ent this		od							
	Purpose of Disbursement Contribution Condidate Name			01			<u></u> .					•	300.0	Û								
	Candidate Name Rep. John Hall Type																					
	Senate President	ement For: 2008 Primary X General Other (specify)				(Conti	ribu	ition													
Г	State: NY District: 19																					
L	SUBTOTAL of Disbursements This Page (optional)											3	300.0	0								
	TOTAL This Period (last page this line number only)			•																	

В.

C.

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)				FOR LIN		E NUMBER: PAGE 107 / 149							9
ITEMIZED DISBURSEMENTS		for each category of the Detailed Summary Page			21b 27	$\prod_{i=1}^{n}$	22 28a	X	23 28b	24 280	F	25 29		26 30b
Any Information copied from such Reports and Staten or for commercial purposes, other than using the nam							the pu		se of so	oliciting	contri		S	
NAME OF COMMITTEE (In Full)	e and addres	ss of arry political	COIII	1111	iiiiee io s	OIIC	it Corti	ibuti	10115 110	JIII SUCII	COIII	muee		
American Hospital Association PAC														
Full Name (Last, First, Middle Initial) Christopher Shays For Congress Committee							Transaction ID: 15884071 Date of Disbursement M 9 M / D 2 9 / Y 2 0 0 8							
Mailing Address 98 East Avenue Rear Building														
City Norwalk	State CT	Zip Code 06851					Amou	nt o	f Each	Disburs	emer	nt this	Perio	od
Purpose of Disbursement In-Kind Contribution: Polling Services				0)11			-			48	375.0	0	
Candidate Name Rep. Christopher Shays					egory/ ype									
Senate President	ement For: Primary Other (spe	2008 X General cify) ▼					In-Kin ling S			oution:	Pol-			
State: CT District: 04 Full Name (Last, First, Middle Initial)										4500	004			
Longhorn PAC							Date o		isburse				V	
Mailing Address 228 S. Washington St. Suite B-20							0 ^M 9	M	1	0 /	` 2	2 0 ŏ	3 '	
City Alexandria	State VA	Zip Code 22314					Amou	nt o	f Each	Disburs				od
Purpose of Disbursement 2008 Contribution				0)11			0			10	0.00	0	Ш
Candidate Name Longhorn PAC					egory/ ype									
Office Sought: House Disburse Senate President State: District:	ement For: Primary Other (spe	General cify) ▼					2008	Cor	ntribut	ion				
Full Name (Last, First, Middle Initial)							Trans	acti	on ID:	1589	8466	 S		
Michael Burgess For Congress								of Di	isburse		V	/ · V	V	
Mailing Address PO Box 2334							0 9	IVI .	1	0 /	' 2	o ŏ	3 '	
City Denton	State TX	Zip Code 76202					Amou	nt o	f Each	Disburs				od
Purpose of Disbursement Contribution			Г	0	11			-			10	0.00	0	
Candidate Name Rep. Michael C. Burgess, M.D.					egory/ ype									
Office Sought: X House Disburse Senate President	ement For: Primary Other (spe	2008 X General cify) ▼					Contri	ibut	ion					
State: TX District: 26														
SUBTOTAL of Disbursements This Page (optional)					•						68	75.0	0	

В.

C.

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)		NUMBER: PAGE 108 / 149
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	y one) 22 X 23 24 25 26 28a 28b 28c 29 30k
Any Information copied from such Reports and Statemor for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full)	and address of any political	COMMINICE TO SO	ilicit contributions from such committee
American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Friends Of Tim Johnson			Transaction ID: 15899129 Date of Disbursement
Mailing Address PO Box 17097			$\begin{bmatrix} \begin{smallmatrix} M & 9 & M \\ 0 & 9 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 0 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 8 \end{smallmatrix} \end{bmatrix}$
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	Full Name (Last, First, Middle Initial) Allyson Schwartz For Congress Mailing Address P.O. Box 2232					Date		oursen) /		0 ŏ 8	Y
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City Somerville	State Zip Code MA 02144		Amount of E	ach Dis	burser	ment	this I	Perio	od .
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City Hinsdale	State Zip Code IL 60522		Amount of E	ach Dis	burser				od .
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Mailing Address 38 Risley Road			09 /	10	/ Y	ž	οŏε	3 ^Y	
City Vernon	State Zip Code CT 06066		Amount of E	ach Dis	burser	-			nd .
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	City Mineola	State Zip Code NY 11501		Amount of Each Disbursement this Perio
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	City Des Moines	State Zip Code IA 50304		Amount of Each Disbursement this Perio
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	Mailing Address P.O. Box 62						0 ^M 9	M /	10	Y	0 ŏ 8	Y
	City Evansville	State IN	!	Zip Code 47701			Amou	int of Ea	ch Disbu			-
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	Mailing Address 6380 Wilshire E	3lvd. #1612					0 ^M 9	M /	10	Y	0 ŏ 8	Y
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	(Last, First, Middle Initial) Works Committee				ransaction ID: Date of Disbursen	
Mailing A	ddress 607 14th Street Ste. 800	t, NW			09 / 16	8 Y 2008
City Washing	yton	State Zip Co DC 2000		A	Amount of Each D	Disbursement this Peri
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Full Name (Last, First, Middle Initial) Graves For Congress						on ID: sburse	15924 ment	844		
Mailing Address 2345 Grand Suite 2400				0 ^M 9	M /	^D 1	6 / C	Ž	0 ŏ 8	Y
City Kansas City	State Zip Code MO 64108			Amou	int of	Each I	Disburse			
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Candidate Name Rep. Samuel B. Graves, Jr.		I	egory/ ype							
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Mailing Address 586 Orange Street				0 9						
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	State Zip Code MA 01853			Amou	int of	Each I	Disburse	-		
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	City Charleston	State Zip Code WV 25327				Amou	nt of	Each	Disb	ursen	nent thi	
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	Full Name (Last, First, Middle Initial) Republican Majority Fund					Trans Date			_		349	
	Mailing Address P.O. Box 1550					0 ^M 9	M /	^D 1	5	/ Y	žοò	8
	City Ponca City	State Zip Code OK 74602				Amou	nt of	Each	Disb	ursen	nent thi	
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 Full Name (Last, First, Middle Initial) ERIC PAC-Every Republican is Crucial PA Mailing Address 209 Pennsylvania Avenu		Transaction ID: 15924853 Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
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Full Name (Last, First, Middle Initial) Judd Gregg Committee		Transaction ID: 15924854 Date of Disbursement M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO Box 1812		03 13 2000
City Concord Purpose of Disbursement	State Zip Code NH 03302	Amount of Each Disbursement this Period
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Full Name (Last, First, Middle Initial) Collins For Senator		Transaction ID: 15924858 Date of Disbursement
Mailing Address PO Box 1096		09 15 7 2008
City Bangor	State Zip Code ME 04402	Amount of Each Disbursement this Period
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Mailing Address P.O. Box 2406						0 9	_	<u></u>	5		20	0 0	_
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City Houston	State TX	Zip Code 77241				Amou	nt o	f Each	Disb	urser	ment t	his P	erio
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State: SC District: 06											
Full Name (Last, First, Middle Initial) Lautenberg For Senate						isburs	: 159 ement	249	952		
Mailing Address Riverfront Plaza Station PO Box 200596				O _M S		/ D	15	Y	ž	0 Ŏ 8	3 ^Y
City Newark	State Zip Code NJ 07102			Amo	ount c	f Each	n Disbu	rser			
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Full Name (Last, First, Middle Initial) Engel For Congress							: 159 ement	249	953		
Mailing Address 462 California Road				0 8) M	/ D	15	Y	ž	o ŏ s	3 ^Y
City Bronxville	State Zip Code NY 10708			Amo	ount c	of Each	n Disbu	rser	nent	this	Period
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ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 23 24 25 28a 28b 28c 29
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Full Name (Last, First, Middle Initial)			Transaction ID: 15924955
Fattah For Congress			Date of Disbursement O 9 Date of Disbursement O 9 D D D V Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 3900 Ford Road Suite	12-0		0 0 1 0 2 0 0 0
City Philadelphia	State Zip Code PA 19131		Amount of Each Disbursement this Period
Purpose of Disbursement Contribution		011	2500.00
Candidate Name Rep. Chaka Fattah		Category/ Type	
Office Sought: X House Senate President State: PA District: 02	sement For: 2008 Primary X General Other (specify)		Contribution
Full Name (Last, First, Middle Initial)			Transaction ID: 15924960
Friends Of Bill Posey			Date of Disbursement
Mailing Address 1824 South Fiske Boul	evard		$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
City Rockledge	State Zip Code FL 32955		Amount of Each Disbursement this Period
Purpose of Disbursement Contribution		011	2500.00
Candidate Name Mr. Bill Posey		Category/ Type	
Office Sought: X House Senate President State: FL District: 15	sement For: 2008 Primary X General Other (specify)		Contribution
Full Name (Last, First, Middle Initial) John D. Dingell For Congress Committee	9		Transaction ID: 15924965 Date of Disbursement
Mailing Address 607 14th Street N.W. Suite 800			09 M / D 15 / Y Y Y O Y 8 Y
City Washington	State Zip Code DC 20005		Amount of Each Disbursement this Perio
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Candidate Name Rep. John D. Dingell		Category/ Type	
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	Mailing Address PO Box 12786	8						0 ^M 9	M /	^D 1	8 /	Y	ž 0 ŏ 8	3 ^Y
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	Candidate Name Rep. Bob Filner					_	gory/							
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	State: CA District: 51 Full Name (Last, First, Middle Initial) Dreier For Congress Committee										159	4412	6	
	Mailing Address P.O. Box 505							0 ^M 9	M /		8 /	Y	ž 0 ŏ 8	8 ^Y
	City Upland		State CA	Zip Code 91785				Amo	unt of	Each	Disbu	rseme	nt this	Peric
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	Full Name (Last, First, Middle Initial) Anna Eshoo For Congress	I						Date	of Dis	sburs	159 ement			
	Mailing Address 555 Capitol Ma	ıll, Suite 14	125					0 ^M 9	M /	^D 1	8	Y	ž 0 ŏ 8	3 ^Y
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NAME OF COMMITTEE (In Full)										
American Hospital Association PAC										
Full Name (Last, First, Middle Initial) Jim Gerlach For Congress Committee				Transa Date o			15944 ment	128	1	
Mailing Address PO Box 87				0 9	И /	^D 1	8 /	Ž	0 ŏ 8	Y
City Uwchland	State Zip Code PA 19480			Amour	nt of	Each	Disburse			-
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Mailing Address 551 Main Street Suite 120				0 9						
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	Mailing Address	Post Office Bo	x 632			0 9 M / D 1 9 / Y 2 0 0 8	8 ^Y
	City Union City		State NJ	Zip Code 07087		Amount of Each Disbursement this	
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	New Millenium Office Sought:	PAC House	Disbursement For:		Category/ Type		
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	Mailing Address	22 West Pador	nia Road Suite C-1	41		0 9 M / D 1 9 / Y 2 0 0 8	8 ^Y
	City Timonium		State MD	Zip Code 21093		Amount of Each Disbursement this	Perio
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	Mailing Address	12 Trumbull St	reet			0 9 M / D 1 9 / Y 2 0 0 8	8 ^Y
	City New Haven		State CT	Zip Code 06511		Amount of Each Disbursement this	
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American Hospital Association PAC													
Full Name (Last, First, Middle Initial) Moore For Congress										159	44138	3	
Mailing Address PO Box 16646							M	/	^D 1		Y	ž o ŏ 8	В
City Milwaukee	State WI	Zip Code 53216				Amo	unt o	of Ea	ach [Disbur	semer	nt this	Peri
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Mailing Address P.O. Box 3370						o ^M S) M		1 !	9 /	Y 2	ž 0 Ŏ 8	8 ^Y
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State: TX District: 25						_									
Full Name (Last, First, Middle Initial) Mike McIntyre For Congress							Date o	of Di	isburs	en				_	
Mailing Address P.O. Box 1							0 9	M	/ D	1 5	9 / L	ž	0 0 8	3 ^Y	
City Lumberton	State NC	Zip Code 28359					Amou	nt o	f Each	ı D	isburse				d
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	Utica Purpose of Disbursement Contribution	NY 13505	Tr	01	1					1	000.00)
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	Full Name (Last, First, Middle Initial) Nita Lowey For Congress					Date	of D	isburs	ement			V
	Mailing Address PO Box 271					0 9	М	/ 1	9 /	Y	žοŏε	3 1
	City White Plains	State Zip Code NY 10605				Amou	int o	f Each	Disbu		nt this F	
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	Mailing Address 1819 Brownsboro Roa Suite 100	d				0 9	М	/ 1	9	Y	ž 0 ŏ 8	3
	City Louisville	State Zip Code KY 40206				Amou	int o	f Each	Disbu		nt this F	
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	Rep. John A. Yarmuth			Typ	jory/ e							
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	Mailing Address	PO Box 8446						o ^M 9	M /	19	/ Y	žoŏ	8 ^Y
	City Asheville		Sta NO		Zip Code 28814			Amo	unt of E	ach Disl	bursem	ent this	
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	Mailing Address	P.O. Box 4436 250 Prairie Cer						0 ^M 9	M /	^D 1 9	/ Y	žoŏ	8 ^Y
	City Eden Prairie	2001141110 001	Sta MI		Zip Code 55344			Amo	unt of E	ach Disl		ent this	
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	Candidate Name Mr. Erik Pauls					tegory Type	//						
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	Full Name (Last, Lance for Con	First, Middle Initial) gress						Date	of Disb	ID: 1: ursemei			
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NAME OF COMMITTEE (In Full) American Hospital Association PA	0		
Full Name (Last, First, Middle Initial) Halvorson For Congress			Transaction ID: 15948007 Date of Disbursement
Mailing Address 1395 C Main St			09 7 19 7 2008
City Crete	State Zip Code IL 60417		Amount of Each Disbursement this Peri
Purpose of Disbursement Contribution		011	1000.00
Candidate Name Debbie Halvorson		Category/ Type	
Office Sought: X House Senate President	Disbursement For: 2008 Primary X General Other (specify)		Contribution
State: IL District: 11 Full Name (Last, First, Middle Initial)			Transaction ID: 15040176
Johanns for U.S. Senate			Transaction ID: 15949176 Date of Disbursement
Mailing Address 228 S. Washingt Suite B-20	on Street		$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
City Alexandria	State Zip Code VA 22314		Amount of Each Disbursement this Peri
Purpose of Disbursement Contribution		011	1000.00
Candidate Name Mike Johanns		Category/ Type	
Office Sought: House X Senate President State: NE District:	Disbursement For: 2008 Primary X General Other (specify) ▼		Contribution
Full Name (Last, First, Middle Initial) Rogers For Congress			Transaction ID: 15950444 Date of Disbursement
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City Brighton	State Zip Code MI 48116		Amount of Each Disbursement this Peri
Purpose of Disbursement Contribution		011	1000.00
Candidate Name Rep. Michael J. Rogers		Category/ Type	
Office Sought: X House Senate President	Disbursement For: 2008 Primary X General Other (specify)	•	Contribution
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Any Information copied from such Reports and Stator for commercial purposes, other than using the na				
NAME OF COMMITTEE (In Full) American Hospital Association PAC				
Full Name (Last, First, Middle Initial) Merchant Bankcard Mailing Address 1601 Elm Street			Transaction ID: 15988626 Date of Disbursement	Y
City Dallas	State Zip Code TX 75201		Amount of Each Disbursement this Pe	eriod
Purpose of Disbursement Merchant Fees Candidate Name		001 Category/ Type	170.30	
Office Sought: House Senate President State: District:	rsement For: Primary Gen Other (specify) ▼	eral	Merchant Fees	
Full Name (Last, First, Middle Initial) Citibank, F.S.B.			Transaction ID: 15988633 Date of Disbursement	
Mailing Address 1400 G Street, NW			09 18 7 2008	
City Washington	State Zip Code DC 20005		Amount of Each Disbursement this Pe	riod
Purpose of Disbursement Bank Fee Candidate Name		001 Category/	39.13	
	sement For:	Type	Pork Foe	

General

SUBTOTAL of Disbursements This Page (optional)	•	209.43
TOTAL This Period (last page this line number only)	<u> </u>	8914.89

Primary

Other (specify)

State:

Bank Fee